


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**


**DOCUMENT # L06000014484**  
 1. Entity Name  
 2563 NORTH TOLEDO BLADE BOULEVARD, LLC.



Principal Place of Business  
 1990 MAIN STREET, SUITE 700  
 SARASOTA, FL 34236

Mailing Address  
 C/O THOMAS B. LUZIER  
 P.O. BOX 3948  
 SARASOTA, FL 34230

**DO NOT WRITE IN THIS SPACE**



04172008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4328390	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LUZIER, THOMAS B  
 1990 MAIN STREET, SUITE 700  
 SARASOTA, FL 34236

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

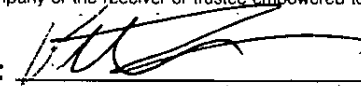
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GENERSICH, PETER 1621 STANFORD LANE SARASOTA, FL 34231
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U00000943921  
 05/29/08-80079-006 138.75

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  PETER GENERSICH 4/23/08 941-344-1006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #