


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000016155


1. Entity Name
SALADACRES, LLC



Principal Place of Business
**105 WEEPING WILLOW
 UVALDE, TX 78801**

Mailing Address
**105 WEEPING WILLOW
 UVALDE, TX 78801**

DO NOT WRITE IN THIS SPACE



05062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 04-3839485	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

**TUTTLE, RON F
 828 NE 15TH AVE STE 4
 FORT LAUDERDALE, FL 33304**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000350971
 06/04/08-80013-008 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TUTTLE, RONALD # 217 53051 RANGE RD. 211 ARDROSSAN, ALBERTA, T8G2C6
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *R. Tuttle* Date: May 1, 2008 Daytime Phone #: 780 922-3390

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE