04/25/2008 21:48 FAX 8136591984 COUNTRY VILLAGE

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Apr 30, 2008 8:00 am
Secretary of State
04-30-2008 90017 044 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000017934

1. Entity Name
SUMTER ENTERPRISES, LLC

50004957

Principal Place of Business	Mailing Address
539 NORTH MARKET BLVD. WEBSTER, FL 33597	539 NORTH MARKET BLVD. WEBSTER, FL 33597

04182008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
7961 CR. 647	7961 CR647
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bushnell, Fl.	City & State: Bushnell, Fl.
Zip: 33513 Country: Sumter	Zip: 33513 Country:

4. FEI Number 33-1176367 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
WALLER, FERRIS S
539 NORTH MARKET BLVD.
WEBSTER, FL 33597

7. Name and Address of New Registered Agent
Name: Ferris S. Waller
Street Address (P.O. Box Number is Not Acceptable): 7961 C.R. 647
City: Bushnell, Fl. FL Zip Code: 33513

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 Ferris S. Waller [signature] DATE 4/25/08
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
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR WALLER, FERRIS S 539 NORTH MARKET BLVD. WEBSTER, FL 33597	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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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: Ferris S. Waller [signature] 4/25/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #