

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000048519

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** MORNINGSIDE FLORIDA, LLC

**Current Principal Place of Business:**

5801 SW 185 WAY  
SOUTHWEST RANCHES, FL 33332 US

**New Principal Place of Business:**

**Current Mailing Address:**

5801 SW 185 WAY  
SOUTHWEST RANCHES, FL 33332 US

**New Mailing Address:**

FEI Number: 20-4860181      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ENRIQUEZ, STEPHEN C  
5801 SW 185 WAY  
SOUTHWEST RANCHES, FL 33332 US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ENRIQUEZ, STEPHEN C  
Address: 5801 SW 185 WAY  
City-St-Zip: SOUTHWEST RANCHES, FL 33332 US

Title: MGR ( ) Delete  
Name: CALDWELL, JOHN  
Address: 5801 SW 185 WAY  
City-St-Zip: SOUTHWEST RANCHES, FL 33332 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STEPHEN ENRIQUEZ

MGR

05/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date