2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000051330

1. Entity Name THREE SIDES, LLC



FILED Jan 22, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3825 CANOE CREEK ROAD ST CLOUD, FL 34772 3825 CANOE CREEK ROAD ST CLOUD, FL 34772



01162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

YATES, HENRY C 3825 CANOE CREEK ROAD ST CLOUD, FL 34772

STREET ADDRESS CITY-ST-ZIP

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.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
After May	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
NAME STREET ADDRESS CITY-ST-ZIP	MGR YATES, HENRY C 3825 CANOE CREEK ROAD ST CLOUD, FL 34772		: : מתחחחח	
TITLE	MGRM	n1/2	000000791103 01/23/08-80060-020 138.75	
NAME STREET ADDRESS	YATES, REESIE M MGR.	O I Y E		
CITY-ST-ZIP	3825 CANOE CREEK RD SAINT CLOUD, FL 34772			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,	DO NO	T WRITE	
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NAME STREET ADDRESS		1 ""	3 OI AGE	
CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		······································		
TITLE NAME				

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: ALLE OF PRINTED HAME OF PRINTED HAM

1-08-08

407.892.8715

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