2008 LIMITED LIABILITY COMPANY ANNUAL REPORT				FILED		
DOCU	IMENT # L060000	61584		Apr 04, 2008 08:00 Secretary of Stat		8:00 A
1. Entity Nar TOLEDC	) HARBOR, L.L.C.				Secretary of	State
Principal Pla	ce of Business	Mailing Address				
850 DUNBAR AVENUE 850 DUNBAR AVENUE OLDSMAR, FL 34677 OLDSMAR, FL 34677						
our official of the					III OOLID GIILI IILUL BIILI ILIIL OLULLI ILI	1
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				04012008 No Chg-LLC CR2E083 (12/07)		
ר ב	DO NOT WRIT	re in this s	PACE	4. FEI Number	Applied Fe	
				20-5271971	Not Applic	able
	6. Name and Address of Cur	rent Registered Agont		5. Certificate of Status Desired	Fee Required	
		rent Kegistered Agent				
TREUHAFT, JOEL S ESQ. 2274 STATE ROAD 580				DO NOT WRITE		
SUITE C CLEARWATER, FL 33763				IN THIS SP	PACE	
	e named entity submits this statementions of registered agent.	ant for the purpose of changing its	registered office or register	ed agent, or both, in the State of Fl	orida. I am familiar with, and acc	cept
SIGNATURE						
	Signature, typed or printed name of registered	agent and title if applicable (NOTE	Registered Agent signature required	t when reinstaling)	DATE	
FILI After Ma	E NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$53	A.75		Lines.		
	· · · · · · · · · · · · · · · · · · ·			00001 04/16/9	00881932 <del>8-80020-017-143.7</del>	5
9. TILE	MGRM	MBERS/MANAGERS	ľ			
NAME STREET ADDRESS	CIANCI, PAUL A 850 DUNBAR AVENUE					
CITY-ST-ZIP	OLDSMAR, FL 34677					
TITLE NAME	MGRM MANERA, MARK					
STREET ADDRESS						
CITY-ST-ZIP	TOLEDO, OH 43612					
TITLE NAME						Í
STREET ADDRESS				DO NOT W	/RITE	
TITLE				IN THIS SP	PACE	
NAME STREET ADDRESS						
CITY - ST - ZIP						
TITLE						
NAME STREET ADDRESS						
CITY - ST · ZIP	·					
TITLE NAME					•.	
STREET ADDRESS	110601-54 (50 C) (35) 110601-54 (50 C) (35)	5 a				
,	certify that the information supplied on this report is true and accurate ability company or the receiver of t	with this thing does not qualify fo	or the exemptions containe	d in Chapter 119, Florida Statutes.	I further certify that the informat	ion the
, limited lia	ability company or the receiver of t	rustee enpowered to execute this	report as required by Cha	apter 608, Florida Statutes.		
SIGNA	rupe. Vaul	Aleonici		3/31/08	813-814-1505	•
JIGIAI		ME OF SCHING MANAGING MEMBER, OR A	UTHORIZED REPRESENTATIVE	Dete	Daytime Phone #	

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