

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071424

Entity Name: ALABAMA BLUFF LAND, LLC

FILED  
Mar 19, 2008  
Secretary of State

**Current Principal Place of Business:**

6881 W. LONGBOW BEND  
DAVIE, FL 33331 US

**New Principal Place of Business:**

**Current Mailing Address:**

6881 W. LONGBOW BEND  
DAVIE, FL 33331 US

**New Mailing Address:**

FEI Number: 20-5239431

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, BRYAN  
11011 SHERIDAN STREET #305  
COOPER CITY, FL 33026 US

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

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: MGRM ( ) Delete  
Name: MILLER, BRYAN  
Address: 6881 W LONGBOW BEND  
City-St-Zip: DAVIE, FL 33331 US

Title: MGRM ( ) Delete  
Name: MILLER, MIRIAM  
Address: 3031 SW 141 AVENUE  
City-St-Zip: MIRAMAR, FL 33027 US

Title: MGRM ( ) Delete  
Name: COLLAZO, ELYAM  
Address: 15561 SW 31 LANE  
City-St-Zip: MIAMI, FL 33185 US

**ADDITIONS/CHANGES:**

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

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: BRYAN MILLER

MGR

03/19/2008

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