2008 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Jan 24, 2008 08:00 AN **DOCUMENT # L06000092118 Secretary of State** 1. Entity Name CLB, LLC Principal Place of Business Mailing Address 7927 CYPRESS LAKE DRIVE 7927 CYPRESS LAKE DRIVE SARASOTA, FL 34242 SARASOTA, FL 34242 01212008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-5587645 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BECHTOLD, DANIEL A DO NOT WRITE 240 NOKOMIS AVENUE S., SUITE 200 VENICE, FL 34285 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 d applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE MGR BACKUS, CHARLES L III NAME 7927 CYPRESS LAKE DRIVE STREET ADDRESS SARASOTA, FL 34242 CITY-ST-ZIP TITLE U00000796141 01/29/08-80021-004 143.75 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST- ZIP IN THIS SPACE TITLE STREET ADDRESS

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 faceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MASIF STREET ADDRESS CITY-ST-ZIP