

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90326 022 \*\*\*\*50.00

**60047055**



<b>DOCUMENT # L06000094536</b> 1. Entity Name <b>STOCKBRIDGE CAPITAL FUNDING LLC</b>					
Principal Place of Business <b>7230 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437 US</b>			Mailing Address <b>7230 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437 US</b>		
2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip		City & State  Zip		4. FEI Number <b>86-1174754</b>	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>HAYES, DAVID A 7230 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				DATE <b>4/30/07</b>	
SIGNATURE <i>[Signature]</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				Filing Fee is <b>\$50.00</b> Due by <b>May 1, 2007</b>	
Make check payable to Florida Department of State				9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		10. ADDITIONS/CHANGES			
MGRM HAYES, DAVID A 7230 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
MGRM WRUBEL, DAVID 7230 BRUNSWICK CIRCLE BOYNTON BEACH, FL 33437		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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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: <i>DAVID WRUBEL</i> <i>[Signature]</i> <b>4/30/07</b> <b>600 673 1626</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					