2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100000

PO BOX 2005

WEIRTON, WV 26062

Address:

City-St-Zip:

Entity Name: FLORIDA TRAILER RANCH, LLC

FILED Jul 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14770 NORMANDY BLVD. JACKSONVILLE, FL 32234 **Current Mailing Address: New Mailing Address:** 14770 NORMANDY BLVD JACKSONVILLE, FL 32234 FEI Number: 20-5704168 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCKEEL, SHANE 14770 NÓRMANDY BLVD. JACKSONVILLE, FL 32234 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PETROZZI, LARRY Name: Name: Address: 7360 STATE ROUTE 45 Address: City-St-Zip: LISBON, OH 44432 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: FRANKOVITCH, CARL Name: Address: 337 PENCO ROAD Address: City-St-Zip: WEIRTON, WV 26062 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HORTON, HARRY Name: Name: 132 SOUTH BROAD ST. SUITE 103 Address: Address: City-St-Zip: CANFIELD, OH 44406 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MCKEEL, SHANE Name: 14770 NORMANDY BLVD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32234 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition FRANKOVITCH, NICHOLAS C Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: SHANE MCKEEL MGRM 07/08/2008