


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000106268 1. Entity Name FAIRFIELD CAPITAL, LLC	
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Principal Place of Business 330 SOUTH PINEAPPLE STE 115 SARASOTA, FL 34236	Mailing Address 330 SOUTH PINEAPPLE STE 115 SARASOTA, FL 34236
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DO NOT WRITE IN THIS SPACE



04012008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-8908046	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**WILSON, MICHAEL J
200 SOUTH ORANGE AVE
SARASOTA, FL 34236**

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**


0000008908046
04/15/08-80059-004 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARCUS, ANDREW 330 S PINEAPPLE AVE #115 SARASOTA, FL 34235
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARCUS, ROBERT L 330 S PINEAPPLE AVE #115 SARASOTA, FL 34236
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**DO NOT WRITE
IN THIS SPACE**

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:  **4/1/08 991-977-3329**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #