2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-SI-ZIP
TITLE
NAME
STREET ADDRESS
CITY-SI-ZIP
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STREET ADDRESS
CITY-SI-ZIP

FILED Jan 16, 2008 08:00 AN Secretary of State

DOCUMENT # L06000107581 1. Entity Name DRUBOCET PARK LLC		Secretary of St
Principal Place of Business 720 CLUBHOUSE WAY SATELLITE BEACH, FL 32937 Mailing Address 720 CLUBHOUSE WAY SATELLITE BEACH, FL 32937	7	
		01122008No Chg-LLC CR2E083 (12/07)
DO NOT WRITE IN THIS SPA	CE	4. FEI Number Applied For 20-5829160 Not Applicable
and the state of t		5. Certificate of Status Desired Fee Required
6. Name and Address of Current Registered Agent BRUNER, NINA A 720 CLUBHOUSE WAY SATELLITE BEACH, FL 32937		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 Signature, typed or proted name of registered agent and title il applicable (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	ou Agait spriatile require	U00000786641 01/17/08-80048-009 138.75
9. MANAGING MEMBERS/MANAGERS TITLE MGRM NAME BRUNER, GERALD W STREET ADDRESS 720 CLUBHOUSE WAY CITY-ST-ZIP SATELLITE BEACH, FL 32937		
TITLE MGRM NAME GEMBAROWSKI, CHARLES J STREET ADDRESS 455 E. AMHERST CIRCLE CITY-ST-ZIP SATELLITE BEACH, FL 32937		
TITLE MGRM NAME GEMBAROWSKI , RUTHMARY C STREET ADDRESS 455 E. AMHERST CIRCLE CITY-SI-ZIP SATELLITE BEACH, FL 32937		DO NOT WRITE
TITLE NAME CORPUS ADDRESS		IN THIS SPACE

SIGNATURE: Clarles Land Typed or PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DELD DELD DESIGN DESIGN PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

^{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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.