

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR)**

DOCUMENT # L06000108630

1. Entity Name

6320 SOUTH TRAIL, LLC



**FILED  
Feb 22, 2007 8:00 am  
Secretary of State**

01-29-2007 90139 002 \*\*\*\*50.00



1st MOORE CR2E083 (10/06)

Principal Place of Business		Mailing Address	
3935 NORTH WASHINGTON BOULEVARD SARASOTA FL 34234		3935 NORTH WASHINGTON BOULEVARD SARASOTA FL 34234	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SILBERSTEIN, DAVID M 720 SOUTH ORANGE AVENUE SARASOTA FL 34236		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

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 if applicable:

(NOTE: Registered Agent signature required when registering)

DATE

**FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Florida Department of State  
Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS		10.	ADDITIONS/CHANGES	
NAME	MGR DESSBERG, RODNEY 3935 NORTH WASHINGTON BOULEVARD SARASOTA FL 34234	□ Delete	NAME	□ Change □ Addition
NAME		□ Delete	NAME	□ Change □ Addition
NAME		□ Delete	NAME	□ Change □ Addition
NAME		□ Delete	NAME	□ Change □ Addition
NAME		□ Delete	NAME	□ Change □ Addition
NAME		□ Delete	NAME	□ Change □ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

RODNEY DESSBERG

1.22.07

9413592277

Date

Daytime Phone #



ATTACHMENT  
30601016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2007

6320 SOUTH TRAIL, LLC  
3935 NORTH WASHINGTON BOULEVARD  
SARASOTA, FL 34234

Subject: **6320 SOUTH TRAIL, LLC**

Reference Number: **L06000108630**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE  
ANNUAL REPORTS SECTION

Block 4 completed  
"Not applicable" as  
this company does not  
employ and has no  
employees.