


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000114161 1. Entity Name PRIDE EXECUTIVE SUITES, L.L.C.	
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Principal Place of Business C/O DEAN J. TRANTALIS, ESQ 2255 WILTON DRIVE WILTON MANORS, FL 33305	Mailing Address C/O DEAN J. TRANTALIS, ESQ 2255 WILTON DRIVE WILTON MANORS, FL 33305
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04302008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-8058711	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TRANTALIS, DEAN J ESQ
 C/O DEAN J. TRANTALIS, ESQ
 2255 WILTON DRIVE
 WILTON MANORS, FL 33305

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 reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SILVER, MARTIN 41 INDIAN CREEK ISLAND RD INDIAN CREEK VILLAGE, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 05/29/08-80073-011-138.75

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: *Dean J. Trantalis* *As Agent/Property Manager* 4/25/08 954-745-5800

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