## **2008 LIMITED LIABILITY COMPANY**

## Apr 11, 2008 08:00 A Secretary of State **ANNUAL REPORT DOCUMENT # L06000121413** 1. Entity Name SEASIDE RANCH, LLC Principal Place of Business Mailing Address 14000 S. MILITARY TRAIL 14000 S. MILITARY TRAIL SUITE 205 SUITE 205 DELRAY BEACH, FL 33484 DELRAY BEACH, FL 33484 CR2E083 (12/07) 03242008 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-8081855 Not Applicable \$5.00 Additional all in the 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE YOMTOB, BEN 14000 S. MILITARY TRAIL **SUITE 205** IN THIS SPACE DELRAY BEACH, FL 33484 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 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 04/23/08-80072-013:138,75 9. MANAGING MEMBERS/MANAGERS MGRM TITLE YOMTOB, BEN NAME STREET ADDRESS 14000 S. MILITARY TRAIL, SUITE 205 CITY-ST-ZIP DELRAY BEACH, FL 33484 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPAC TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

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 pry 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 received or truettee expowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

**FILED**