

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000121584

1. Entity Name
N/S CEDAR ISLAND, LLC



Principal Place of Business
933 LEE ROAD, STE. 400
ORLANDO, FL 32810

Mailing Address
933 LEE ROAD, STE. 400
ORLANDO, FL 32810



04102008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, BRYAN A
933 LEE ROAD, STE. 400
ORLANDO, FL 32810

**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 printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

U000000904839

05/01/08 00029-004 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
JOHNSON, CHERYL A
1621 WESTCHESTER AVE
WINTER PARK, FL 32789

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

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

Date

Daytime Phone #

[Signature] **BRYAN A. JOHNSON** 4-11-08 407-629-5595