

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000009187

Entity Name: SCITUATE HARBOR, LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1503 BUENOS AIRES BLVD.  
THE VILLAGES, FL 32159

**New Principal Place of Business:**

1503 BUENOS AIRES BLVD.  
SUITE 160  
THE VILLAGES, FL 32159

**Current Mailing Address:**

1503 BUENOS AIRES BLVD.  
THE VILLAGES, FL 32159

**New Mailing Address:**

1503 BUENOS AIRES BLVD.  
SUITE 160  
THE VILLAGES, FL 32159

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TAFUR, ANGEL E  
1503 BUENOS AIRES BLVD.  
THE VILLAGES, FL 32159 US

**Name and Address of New Registered Agent:**

TAFUR, ANGEL E  
1503 BUENOS AIRES BLVD.  
SUITE 160  
THE VILLAGES, FL 32159 US

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.

SIGNATURE: ANGEL TAFUR

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TAFUR, ANGEL  
Address: 2293 WEATHERED WOOD DR  
City-St-Zip: LEESBURG, FL 34748

Title: MGR  
Name: TAFUR, LAUREN  
Address: 2293 WEATHERED WOOD DR  
City-St-Zip: LEESBURG, FL 34748

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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: ANGEL TAFUR

MGRM

04/30/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date