2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 29, 2008 8:00 am Secretary of State **DOCUMENT # L07000032133** 04-29-2008 90027 044 ***138.75 SHERWOOD FARM NORTH, LLC Mailing Address Principal Place of Business 60031333 1001 EAST TELECOM DRIVE 1001 EAST TELECOM DRIVE BOCA RATON, FL 33431 BOCA RATON, FL 33431 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082008 CR2E083 (12/06) Chg-LLC Applied For City & State City & State 4. FEI Number Not Applicable \$5.00 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code FI 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 Make check payable to After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. Addition MGR TITLE TITLE ☐ Change ☐ Delete SILVER, LARRY D NAME NAME STREET ADDRESS STREET ADDRESS 1001 EAST TELECOM DRIVE CITY - ST- ZIP BOCA RATON, FL 33431 CITY-ST-ZIP ☐ Addition CEO ☐ Change TITLE □ Delete TITLE SILVER, LARRY D NAME NAME 1001 EAST TELECOM DRIVE STREET ADDRESS STREET ADDRESS CITY - ST - ZIP BOCA RATON, FL 33431 CITY-ST-ZIP MGR ☐ Change ☐ Addition TITLE ☐ Delete TITLE MINNIEAR, EDWARD O JR. STREET ADDRESS 1001 EAST TELECOM DRIVE STREET ADDRESS CITY-ST-7IP BOCA RATON, FL 33431 CITY - ST - ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE MINNIEAR, EDWARD O JR. NAME NAME STREET ADDRESS 1001 EAST TELECOM DRIVE STREET ADDRESS CITY - ST- ZIP BOCA RATON, FL 33431 CITY - ST- ZIP Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

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

NAME

STREET ADDRESS

CITY-ST-ZIP

Jesse A. Holshouser, CFO

04/21/08 (561) 981-5252

Daytime Phone #

FILED