2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

FILED Mar 17, 2008 8:00 am Secretary of State

Daytime Phone #

1. Entity Nan			378					03-1	7-2008	-)47 ***13	8.75
•	ce of Büsiness ¹ OCK POINT ROAL 33458		Mailing Address 5726 PENNOCK POINT ROAD JUPITER, FL 33458				60015430					
3 Principal (358/)	Place of Business	PACK Dr	3. Mailing Address	TER F	PARK D)/						
Suite, Apt. #, etc. Suite F-12			SUITE F-12				1072008	Chg	LLC	CR2E	083 (12/06)	
المرس المالي	TER	FL	SUPITER	FL	,	4.	FEI Numt	oer Vo- (0178:	262	_ As	oplied For of Applicable
32545	9 PM	ountry M BEACH	33458	Coun	Y BEX	EH 5.		e of Status			\$5.00 Add	ditional
, ,	6. Name and	Address of Current	Registered Agent	, , , , , , , , , , , , , , , , , , ,			Name an	d Address	s of New R	egistered		
KLEIN, ST	UART B				Name							
2801 PGA	BLVD.SUITE ACH, FL 334		Street A			dress (P.O.	Box Numl	oer is Not	Acceptable	e)		
					City				 	FL	Zip Cod	e
8. The above the obliga	e named entity sultions of registered	agent	r the purpose of changin	ig its register	ed office or r	registered a	gent, or b	oth, in the	State of Flo	orida. Lam	. /	and accept
the obliga SIGNATURE	Signature, typed or pri	agent Multiple agent a	nou tite inapplicable	g its registere				oth, in the	Mak	DATE e check (payable to	
signature Fill After Ma	Signature, typed or pri	ilea name of registered agents IS \$138.75 will be \$538.75	and title in pplicable	(NOTE Registere					Mak Florida	DATE e check i	payable to	
the obliga SIGNATURE	Signature, typed or private to the typed or private typed	IS \$138.75 WILL DE STANDER OF THE ST	and title in pplicable	10. ITILI NAM STRE	d Agent signature	e required when	reins(ating)	JA	Mak Florida	DATE e check in Department	payable to nent of Stat	
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