

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000050733

**FILED**  
**Jan 12, 2008**  
**Secretary of State**

**Entity Name:** 5062 TIMBER RIDGE TRAIL, LLC

**Current Principal Place of Business:**

1434 VICKERS LAKE DRIVE  
OCOEE, FL 34761 US

**New Principal Place of Business:**

**Current Mailing Address:**

1434 VICKERS LAKE DRIVE  
OCOEE, FL 34761 US

**New Mailing Address:**

**FEI Number:** 26-0157002      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SMALLEY, CRAIG W EA  
1517 E. HILLCREST STREET  
OCOEE, FL 34761 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SMALLEY, CRAIG W  
Address: 1434 VICKERS LAKE DRIVE  
City-St-Zip: OCOEE, FL 34761 US

Title: MGRM ( ) Delete  
Name: SMALLEY, BELSIS K  
Address: 1434 VICERS LAKE DRIVE  
City-St-Zip: OCOEE, FL 34761 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: CRAIG W SMALLEY

MGRM

01/12/2008

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