2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jun 16, 2008 8:00 am Secretary of State

1. Entity Name	MENT # LU7000059.				04-07-20	08 90239	025 ***1	38.75	
Principal Place 12118 CYPRI CLERMONT, F	ESS LANE	Mailing Address 12118 CYPRESS LANE CLERMONT, FL 34711	us			. 2514 1751 2751 9571	3	00093	95
2. Principal Pl	lace of Business - No P.O. Box #	Su Amn	1PNA	ad					
Suite, Apt. #, etc.		Su	1./	1/1/1	03312008	Chg-LLC	CR2E	083 (12/06)	
City & State	•	of The	me g	jace	4. FEI Numb	61818	3172		oplied For of Applicable
Zip	Country	Zi Fack	raia h	Mon	_5. Certificate	of Status Desired	, 🗆	\$5.00 Add	litional d
	6. Name and Address of Current R	legista			7. Name and	Address of Nev	r Registered	Agent	
NELSON, BARBARA 12118 CYPRESS LANE			Str	-Street Address (P.O. Box Number is Not Acceptable)					
CLERMON	IT, FL 34711				<u>:</u>		·-	- <u></u>	
			Cit	ty	1,	· · · · · · · · · · · · · · · · · · ·	FI	Zip Cod	e
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 lamiliar 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						ake check		
After May	1, 2008 Fee will be \$538.75					Flor	lda Departn	nent of Stati	•
After May	MANAGING MEMBEF	IS/MANAGERS	10.				ida Departn IS/CHANGE		•
	MANAGING MEMBER	S/MANAGERS	TITLE]					Addition
9.	MANAGING MEMBEF		+					S	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGR NELSON, BARBARA 12118 CYPRESS LANE		TITLE NAME STREET ADD CITY-ST-ZII					S	
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