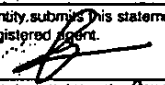
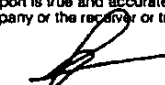


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

05-06-2008 90005 027 ***143.75

DOCUMENT # L07000064364			
1. Entity Name MAGNOLIA FLORIDA, LLC			
Principal Place of Business 615 CRESCENT EXECUTIVE COURT SUITE 120 LAKE MARY, FL 32746		Mailing Address 615 CRESCENT EXECUTIVE COURT SUITE 120 LAKE MARY, FL 32746	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 26-0640315		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SAINT-LAURENT PROPERTIES, LLC 1790 LEGION DRIVE WINTER PARK, FL 32789		7. Name and Address of New Registered Agent Name: American Realty Development, LLC Street Address (P.O. Box Number is Not Acceptable): 615 Crescent Exec. Ct. Suite 120 City: Lake Mary FL Zip Code: 32746	
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: 		DATE: 4/18/08	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LAW, PATRICK E 615 CRESCENT EXEC. CT., SUITE 120 LAKE MARY, FL 32746 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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.			
SIGNATURE: 		DATE: 4/18/08 (408) 337-1440	
SIGNATURE AND TYPED OR PRINTED NAME OF EACHING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Patrick E. Law, Manager		Date	