

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087989

Entity Name: CURVE, LLC

FILED  
Mar 20, 2008  
Secretary of State

**Current Principal Place of Business:**

9696 BONITA BEACH ROAD, SUITE 209  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

9696 BONITA BEACH ROAD  
SUITE 209  
BONITA SPRINGS, FL 34135

**Current Mailing Address:**

9696 BONITA BEACH ROAD, SUITE 209  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

PO BOX 110924  
NAPLES, FL 34108

FEI Number: 26-0795644

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SALVATORI & WOOD, P.L.  
4001 NORTH TAMiami TRAIL, SUITE 330  
NAPLES, FL 34103 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: MGR ( ) Delete  
Name: THORNBURG, MATTHEW  
Address: P.O. BOX 110924  
City-St-Zip: NAPLES, FL 34108

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: THORNBURG, MATTHEW  
Address: P.O. BOX 110924  
City-St-Zip: NAPLES, FL 34108

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: MATTHEW E THORNBURG

MGRM

03/20/2008

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