

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095221

FILED
Sep 05, 2008
Secretary of State

Entity Name: SUNCOAST MEADOWS HOLDINGS LLC

Current Principal Place of Business:

14510 BLACK LAKE ROAD
ODESSA, FL 33556

New Principal Place of Business:

2718 LETAP COURT
101
LAND O LAKES, FL 34638

Current Mailing Address:

14510 BLACK LAKE ROAD
ODESSA, FL 33556

New Mailing Address:

2718 LETAP COURT
101
LAND O LAKES, FL 34638

FEI Number: 20-1079797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

AGENTS AND CORPORATIONS, INC.
300 FIFTH AVENUE SOUTH
SUITE 101-330
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

HERNANDEZ ACCOUNTING
2718 LETAP COURT
SUITE 102
LAND O LAKES, FL 34638 US

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: MARCUS HERNANDEZ CPA

09/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WEAVER, MICHAEL L
Address: 14510 BLACK LAKE ROAD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WEAVER, MICHAEL L
Address: 2718 LETAP COURT
City-St-Zip: LAND O LAKES, FL 34638

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: MICHAEL L. WEAVER

CEO

09/05/2008

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