2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L98000002188

1. Entity Name
HORSESHOE PARK OF COMMERCE, L.C.

Principal Place of Business	Mailing Address
3073 SOUTH HORSESHOE DR., STE. 118 NAPLES, FL 34104	3073 SOUTH HORSESHOE DR., STE. 118 NAPLES, FL 34104

DO NOT WRITE IN THIS SPACE

02212007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number		Applied For
59-3539118		Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

ARNOLD, DEAN A
3073 SOUTH HORSESHOE DR., STE. 118
NAPLES, FL 34104

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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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

**Filing Fee is $50.00
Due by May 1, 2007**

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	HORSESHOE PARK OF COMMERCE MANAGER, LLC
STREET ADDRESS	3073 SOUTH HORSESHOE DR., STE. 118
CITY-ST-ZIP	NAPLES, FL 34104
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

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: _____   3/6/07   239-643-6333

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #