


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 21, 2008 08:00 A
Secretary of State

DOCUMENT # L99000002731 1. Entity Name ROSBOUGH FAMILY ENTERPRISES, LLC	
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Principal Place of Business 7300 ROSBOUGH WAY IMMOKALEE, FL 34142	Mailing Address P.O. BOX 3206 IMMOKALEE, FL 34143
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DO NOT WRITE IN THIS SPACE



02152008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3575484	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HELLINGER, ANDREW B ESQ.
200 SOUTH BISCAYNE BLVD., SUITE 2350
MIAMI, FL 33131

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IN THIS SPACE**

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSBOUGH, DANIEL G P.O. BOX 3206 IMMOKALEE, FL 34142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSBOUGH, CAROLE P.O. BOX 3206 IMMOKALEE, FL 34142
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02/28/08-80036-006 138.75

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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: Daniel G. Rosbough 2-15-08 2396576268
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #