

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004423

Entity Name: 3136 NORTHSIDE DRIVE, L.C.

FILED  
Jan 15, 2008  
Secretary of State

**Current Principal Place of Business:**

3136 NORTHSIDE DRIVE  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

3136 NORTHSIDE DRIVE  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 65-0952369      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KLITENICK, RICHARD M ESQ  
402 APPELROUTH LANE  
KEY WEST, FL 33040 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: LARRAURI, JUAN M MD  
Address: 3136 NORTHSIDE DRIVE  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP ( ) Delete  
Name: BANNON, DAVID MD  
Address: 3136 NORTHSIDE DR.  
City-St-Zip: KWY WEST, FL 33040

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN M. LARRAURI

MGR

01/15/2008

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