

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # M04000003394

1. Entity Name
RIVER LIGHT VIII, LLC



Principal Place of Business
**994 OLD EAGLE SCHOOL ROAD
SUITE 1006
WAYNE, PA 19087**

Mailing Address
**994 OLD EAGLE SCHOOL ROAD
SUITE 1006
WAYNE, PA 19087**



04272006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1452110

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
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 _____

**Filing Fee is \$50.00
Due by May 1, 2006**

1100000540612
05/10/06-80020-012 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BURCH, J. CHRISTOPHER
STREET ADDRESS	994 OLD EAGLE SCHOOL ROAD, SUITE 1006
CITY-ST-ZIP	WAYNE, PA 19087

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-27-06

Date

610-688-0276

Daytime Phone #

J. CHRISTOPHER BURCH