

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004004

Entity Name: WHITE TREE, LLC

FILED  
May 12, 2007  
Secretary of State

**Current Principal Place of Business:**

PO BOX 27740  
LAS VEGAS, NV 89126

**New Principal Place of Business:**

101 CONVENTION CENTER DR.  
SUITE 700  
LAS VEGAS, NV 89109

**Current Mailing Address:**

PO BOX 27740  
LAS VEGAS, NV 89126

**New Mailing Address:**

FEI Number: 20-1630012      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:**

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

FINNEGAN, ANA  
660 BEACHWOOD LANE  
PLANTATION, FL 33317      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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: FINNEGAN, ANA  
Address: 660 BEACHWOOD LANE  
City-St-Zip: PLANTATION, FL 33317

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

Title: MGRM ( ) Delete  
Name: FINNEGAN, MICHAEL  
Address: 660 BEACHWOOD LANE  
City-St-Zip: PLANTATION, FL 33317

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: ANA FINNEGAN

MGRM

05/12/2007

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