


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90263 006 \*\*\*138.75

**DOCUMENT # M06000004935**  
 1. Entity Name  
**YATES HOMESTEAD, LLC**



Principal Place of Business  
**3224 CLUB DRIVE**  
**LOS ANGELES, CA 90064**

Mailing Address  
**3224 CLUB DRIVE**  
**LOS ANGELES, CA 90064**

**DO NOT WRITE IN THIS SPACE**

**60018071**



01142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number <b>20-5438893</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**REGISTERED AGENTS LEGAL SERVICES, LLC**  
**155 OFFICE PLAZA DR.**  
**SUITE A**  
**TALLAHASSEE, FL 32301**

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

**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	<del>MGR BROOKS, KAREN 3224 CLUB DRIVE LOS ANGELES, CA 90064</del> <i>delete</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR YATES, EDWIN 3224 CLUB DRIVE LOS ANGELES, CA 90064
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE 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:** *Edwin Yates* **Edwin Yates** *4/16/08 210 939 0103*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #