

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2008 8:00 am
Secretary of State

03-04-2008 90103 009 ***138.75

| | | | | | |
|--|---|--|--|---|---|
| DOCUMENT # M07000004643 1. Entity Name PVP DRESSAGE II, LLC | | | | | |
| Principal Place of Business C/O PRISM VENTURE PARTNERS, LLC 617 WEST INDIANTOWN ROAD, SUITE 103 JUPITER, FL 33458 | | | Mailing Address C/O PRISM VENTURE PARTNERS, LLC 617 WEST INDIANTOWN ROAD, SUITE 103 JUPITER, FL 33458 | | |
| 2. Principal Place of Business - No P.O. Box # 675 W. Indiantown Road #103 Suite, Apt. #, etc. | | 3. Mailing Address 675 W. Indiantown #103 Suite, Apt. #, etc. | | | |
| City & State Jupiter, FL | | City & State Jupiter, FL | | 4. FEI Number 26-2237314 | |
| Zip 33458 | | Country USA | | 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent NATIONAL CORPORATE RESEARCH, LTD., INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 | | | 7. Name and Address of New Registered Agent Name Prism Venture Partners, LLC Street Address (P.O. Box Number is Not Acceptable) 675 W Indiantown Road Suite 103 City JUPITER FL Zip Code 33458 | | |
| 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: J. Peter Paganelli, Member DATE: 2-26-08 <small>(NOTE: Registered Agent signature required when re-registering)</small> | | | | | |
| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | | | Make check payable to Florida Department of State | | |
| 9. MANAGING MEMBERS/MANAGERS | | | | 10. ADDITIONS/CHANGES | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR SABELLA, RICHARD J 130 BEAR'S CLUB DRIVE JUPITER, FL 33477 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR PAGANELLI, J. PETER 40 EAST MEADOW ROAD WILTON, CT 06897 | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: Richard J. Sabella | | | | Date: 1-04-08 Daytime Phone #: 561.427.6565 | |

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