

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045365

**FILED**  
**Jan 07, 2008**  
**Secretary of State**

**Entity Name:** SANTA BARBARA CENTER, LLC

**Current Principal Place of Business:**

1512 SW 58TH STREET  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

1025 SANTA BARBARA BLVD.  
CAPE CORAL, FL 33991

**Current Mailing Address:**

1616-102 W. CAPE CORAL PKWY  
PMB #313  
CAPE CORAL, FL 33914

**New Mailing Address:**

PMB#313, 1616-102 W. CAPE CORAL PKWY  
CAPE CORAL, FL 33914

FEI Number: 20-5097476

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOMER, DAVID W  
1512 SW 58TH STREET  
CAPE CORAL, FL 33914 US

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

GOMER, DAVID W  
PMB#313, 1616 W. C.C.PKWY, SUITE 102  
CAPE CORAL, FL 33914 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: DAVID W. GOMER

01/07/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GOMER, DAVID W  
Address: 1512 SW 58TH STREET  
City-St-Zip: CAPE CORAL, FL 33914

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GOMER, DAVID W  
Address: PMB#313, 1616 W. C.C. PKWY., SUITE 102  
City-St-Zip: CAPE CORAL, FL 33914

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: DAVID W. GOMER

MGR

01/07/2008

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