

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000045365

FILED
Mar 18, 2009
Secretary of State

Entity Name: SANTA BARBARA CENTER, LLC

Current Principal Place of Business:

1025 SANTA BARBARA BLVD.
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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
PMB#313, 1616 W. C.C.PKWY, SUITE 102
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

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:

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

ADDITIONS/CHANGES:

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: DAVID W. GOMER

MGR

03/18/2009

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