

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M07000007377

FILED
Jun 30, 2009
Secretary of State**Entity Name:** TARPON TOWN LLC**Current Principal Place of Business:**221 N. HOGAN STREET
SUITE 403
JACKSONVILLE, FL 32202 US**New Principal Place of Business:****Current Mailing Address:**221 N. HOGAN STREET
SUITE 403
JACKSONVILLE, FL 32202 US**New Mailing Address:****FEI Number:** 26-1583577**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 US**Name and Address of New Registered Agent:**CONTEGA BUSINESS SERVICES, LLC
ONE INDEPENDENT DRIVE
SUITE 1200
JACKSONVILLE, FL 32202 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: G. RAY DRIVER, JR., P

06/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGR () Delete
Name: PIKE, ALAN
Address: 221 N. HOGAN STREET, SUITE 403
City-St-Zip: JACKSONVILLE, FL 32202 US**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: ALAN PIKE

MGR

06/30/2009

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