

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90340 046 ****55.00

DOCUMENT # L03000050786 1. Entity Name OLD FLORIDA HOMESITES, LLC					
Principal Place of Business 1410 LPGA BLVD. SUITE 148 DAYTONA BEACH, FL 32117			Mailing Address 1410 LPGA BLVD. SUITE 148 DAYTONA BEACH, FL 32117		
2. Principal Place of Business - No P.O. Box # 1617 CRESCENT RIDGE RD		3. Mailing Address 1617 CRESCENT RIDGE RD			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State DAYTONA BEACH FL		City & State DAYTONA BEACH FL		4. FEI Number 20-0455828	
Zip 32118		Country USA		5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVE. DAYTONA BEACH, FL 32115-2491		7. Name and Address of New Registered Agent Name: HAROLD J. BURROUGHS Street Address (P.O. Box Number is Not Acceptable) 1617 CRESCENT RIDGE RD City DAYTONA BEACH FL Zip Code 32118			
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 <u><i>Harold J. Burroughs</i></u> HAROLD J. BURROUGHS 4/12/07 Signature, typed or printed name of registered agent provide if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$50.00 Due by May 1, 2007			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR S.E. CLINE HOLDING COMPANY, INC. P.O. BOX 262 FLAGLER BEACH, FL 32136	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HALJACK, LLC 1617 CRESCENT RIDGE RD DAYTONA BEACH FL 32118
☐ Change ☒ Addition		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURROUGHS, HAROLD J 1410 LPGA BLVD., STE 148 DAYTONA BEACH, FL 32117	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
☐ Change ☐ Addition		☐ Change ☐ Addition			
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☐ Change ☐ Addition		☐ Change ☐ Addition			
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☐ Change ☐ Addition		☐ Change ☐ Addition			
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: <u><i>Harold J. Burroughs</i></u> HAROLD J. BURROUGHS 4/12/07 386-290-2039 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					

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