

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000027732

Entity Name: 19 ST. GEORGE STREET, LLC**Current Principal Place of Business:**11 MAGNOLIA AVE
ST AUGUSTINE, FL 32084**Current Mailing Address:**11 MAGNOLIA AVE
ST AUGUSTINE, FL 32084 US**FEI Number:** 45-4667902**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAILEY, JOHN DJR
780 N PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|-----------------------|
| Title | MGR |
| Name | FRASER, JOHN W |
| Address | 11 MAGNOLIA AVE |
| City-State-Zip: | ST AUGUSTINE FL 32084 |

| | |
|-----------------|-----------------------|
| Title | MGR |
| Name | BINNER, JOAN E |
| Address | 114 HERON'S NEST LN |
| City-State-Zip: | ST AUGUSTINE FL 32080 |

| | |
|-----------------|-----------------------|
| Title | MGR |
| Name | FRASER, V. BRYAN |
| Address | 77 VALENCIA ST |
| City-State-Zip: | ST AUGUSTINE FL 32084 |

| | |
|-----------------|---|
| Title | MGR |
| Name | FRASER, ELAINE |
| Address | C/O OLD WOODEN SCHOOL HOUSE 14 ST. GEORGE ST |
| City-State-Zip: | ST AUGUSTINE FL 32084 |

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN W FRASER**MANAGING MEMBER****02/05/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date