

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003263

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** YELLOW WATER INVESTMENTS, LLC

**Current Principal Place of Business:**

1200 RIVER PLACE BLVD., #902  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

501 RIVERSIDE AVE., SUITE 902  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

501 RIVERSIDE AVE, SUITE 902  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 59-3633231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, BRIAN  
1200 RIVER PLACE BLVD., #902  
JACKSONVILLE, FL 32207 US

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

BROWN, BRIAN  
501 RIVERSIDE AVE., SUITE 902  
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:

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LONGLEAF TIMBER COMP, ANY INC.  
Address: 1200 RIVER PLACE BLVD., #902  
City-St-Zip: JACKSONVILLE, FL 32207

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LONGLEAF TIMBER COMP, ANY INC.  
Address: 501 RIVERSIDE AVE., SUITE 902  
City-St-Zip: JACKSONVILLE, FL 32202

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: ASHTON HUDSON

VP

04/30/2008

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