2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000009475

Entity Name

ST. AUGUSTINE BEACH INVESTMENT, L.L.C.



FILED Apr 21, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

8833 PERIMETER PARK BLVD. SUITE 1104 JACKSONVILLE, FL 32216 8833 PERIMETER PARK BLVD. SUITE 1104 JACKSONVILLE, FL 32216



03142008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3890099

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ATKERSON, CHARLES F JR. 8833 PERIMETER PARK BLVD JACKSONVILLE, FL 32216

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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

Signature, typed or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000911501 05/07/08-80042-024 143.75

_9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR C. ATKERSON, INC. 8833 PERIMETER PARK BLVD., #1104 JACKSONVILLE, FL 32216
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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 fiability company or the regeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

AND TYPED OR PRINTED NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/17/08

904-564-2252

Daytime Phone #