

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000010358

Entity Name: STORM MOUNTAIN, L.L.C.

FILED
Mar 08, 2008
Secretary of State

Current Principal Place of Business:

6 WINDING CREEK WAY
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

6 WINDING CREEK WAY
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3670346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGNONE, GLORIA E
6 WINDING CREEK WAY
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LANDAU, KATHRYN E
Address: 36 ALLENWOOD LOOK
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR () Delete
Name: AGNONE, GLORIA E
Address: 6 WINDING CREEK WAY
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GLORIA E. AGNONE

MGR

03/08/2008

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