## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001013

Entity Name: CABAT PROPERTIES, LLC

FILED Mar 31, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2650 WEST PENSACOLA STREET 2350 WANDA WAY TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32304 **New Mailing Address: Current Mailing Address:** 2650 WEST PENSACOLA STREET 2350 WANDA WAY TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32304 FEI Number: 59-3699534 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NERLAND, DAVID N MGRM 3012 GREYABBEY COURT US TALLAHASSEE, FL 32309 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete NERLAND, DAVID N Name: Name: 3012 GREYABBEY CT Address: Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition NERLAND, JANICE Name: Name: Address: 3012 GREYABBEY CT Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PERKINS, CHARLES L Name: Name: Address: 6231 MYRTLEWOOD CT Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: PERKINS, DIANE Name: 6231 MYRTLEWOOD CT Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition NERLAND, DOUGLAS N Name: Name: 11821 GAIL DRIVE Address: Address: City-St-Zip: TEMPLE TERACE, FL 33617 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition NERLAND, BRENDA J Name: Name: Address: 11821 GAIL DRIVE Address: TEMPLE TERRACE, FL 33617 City-St-Zip: 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: DAVID N. NERLAND MGRM 03/31/2008