2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000005916

1. Entity Name
ST. GEORGE STREET INVESTMENTS, L.L.C.

Principal Place of Business	Mailing Address
17 CORDOVA STREET	17 CORDOVA STREET
ST. AUGUSTINE, FL 32084	ST. AUGUSTINE, FL 32084

DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
59-3716622	Not Applicable

5. Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BAILEY, JOHN D JR.
780 NORTH PONCE DE LEON BLVD.
ST. AUGUSTINE, FL 32084

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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

U00000817683
02/15/08-80012-016 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	FRASER, JOHN W
STREET ADDRESS	108 ISLAND HAMMOCK WAY
CITY-ST-ZIP	ST. AUGUSTINE, FL 32080
TITLE	MGRM
NAME	FRASER, JOHN R
STREET ADDRESS	14 ST. GEORGE STREET
CITY-ST-ZIP	ST. AUGUSTINE, FL 32080
TITLE	MGRM
NAME	BINNINGER, JOAN E
STREET ADDRESS	114 HERON'S NEST LANE
CITY-ST-ZIP	ST. AUGUSTINE, FL 32080
TITLE	MGRM
NAME	FOUNTAIN OF YOUTH PROPERTIES, INC.
STREET ADDRESS	17 CORDOVA STREET
CITY-ST-ZIP	ST. AUGUSTINE, FL 32084
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _John W. Fraser_   2/8/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #