2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L01000006348

Entity Name: BETA FOUR OF ALACHUA L.L.C.

Current Principal Place of Business:

35 MAGNOLIA AVE. SUITE 2084
ST. AUGUSTINE, FL 320842833

New Principal Place of Business:

120 SERENATA SOUTH
UNIT 314
PONTE VEDRA, FL 32082

Current Mailing Address:

35 MAGNOLIA AVE. SUITE 2084
ST. AUGUSTINE, FL 320842833

New Mailing Address:

120 SERENATA SOUTH
UNIT 314
PONTE VEDRA, FL 32082

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WATSON, TODD
7785 BAYMEADOWS WAY SUITE 107
JACKSONVILLE, FL 32256 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: SPIRES, CHARLES
Address: 35 MAGNOLIA AVE. SUITE 2084
City-St-Zip: ST. AUGUSTINE, FL 320842833

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: SPIRES, CHARLES
Address: 120 SERENATA SOUTH UNIT 314
City-St-Zip: PONTE VEDRA, FL 32082

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: CHARLES SPIRES MM 04/30/2008

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