


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

| | |
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| DOCUMENT # L02000009192 1. Entity Name 1909 OCEANSIDE, L.C. |  |
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| Principal Place of Business 2101 JOHN ANDERSON DR ORMOND BEACH, FL 32176 | Mailing Address 2101 JOHN ANDERSON DR ORMOND BEACH, FL 32176 |
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DO NOT WRITE IN THIS SPACE



03042008 No Chg-LLC

CR2E083 (12/07)

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|---|-----------------------------------|
| 4. FEI Number NOT APPLICABLE | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent RAINEY, JOHN A 2101 JOHN ANDERSON DR ORMOND BEACH, FL 32176 | DO NOT WRITE IN THIS SPACE |
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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: JOHN A. RAINEY John A Rainey 03/04/2008
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

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM RAINEY, JOHN A 2101 JOHN ANDERSON DR ORMOND BEACH, FL 32176 |
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04/03/08-80018-005 138.75

DO NOT WRITE
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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 A Rainey JOHN A. RAINEY 03/04/2008 386-441-4843
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #