

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 16, 2007 08:00 AM  
Secretary of State**

**DOCUMENT # L03000003300**

1. Entity Name  
**SFB INVESTMENTS OF PENSACOLA, L.L.C.**



Principal Place of Business  
**120 EAST MAIN STREET  
SUITE A  
PENSACOLA, FL 32501**

Mailing Address  
**120 EAST MAIN STREET  
SUITE A  
PENSACOLA, FL 32501**



04112007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**57-1146428**

Applied For  
**Not Applicable**

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

**6. Name and Address of Current Registered Agent**

**BOOKMAN, ALAN B  
30 SOUTH SPRING STREET  
PENSACOLA, FL 32501**

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$50.00  
Due by May 1, 2007**

000000707292  
04/24/07-80070-005 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP  
**MGR  
NASH, NEAL B  
120 EAST MAIN STREET  
PENSACOLA, FL 32501**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP  
**MGR  
SWAINE, RONALD E  
120 EAST MAIN STREET  
PENSACOLA, FL 32501**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:** *Ronald E. Swaine* **RONALD E. SWAINE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**4/12/07 8504291490**