

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000003937</b>	
1. Entity Name BASIN STREET REALTY, LLC	
Principal Place of Business 444 SEABREEZE BLVD SUITE 1002 DAYTONA BEACH, FL 32118	Mailing Address 444 SEABREEZE BLVD SUITE 1002 DAYTONA BEACH, FL 32118



04212008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
06-1684586

Applied For  
Not Applicable

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

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

MILLER, SANFORD  
444 SEABREEZE BLVD  
SUITE 1002  
DAYTONA BEACH, FL 32118

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000932109  
05/22/08-80042-006 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MILLER, SANFORD 444 SEABREEZE BLVD, STE 1002 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM STRASSER, CHARLES 1316 JOHN ANDERSON ORMOND BEACH, FL 32176
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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:**

*Sanford Miller*  
SANFORD MILLER

4/22/08

386-238-7035

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

Date

Daytime Phone #