2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# L03000010347

Entity Name: MARINA TOWN HOMES INVESTMENT, LLC

Current Principal Place of Business:

2830 MUSKY MINT DR
LAND O LAKES, FL 34638 US

New Principal Place of Business:

16007 IVY LAKE DR
ODESSA, FL 33556 US

Current Mailing Address:

2830 MUSKY MINT DR
LAND O LAKES, FL 34638 US

New Mailing Address:

16007 IVY LAKE DR
ODESSA, FL 33556 US

FEI Number: 56-2355354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GHALY, SAMIRA Y
2830 MUSKY MINT DR
LAND O LAKES, FL 34638 US

Name and Address of New Registered Agent:

GHALY, SAMIRA Y
16007 IVY LAKE DR
ODESSA, FL 33556 US

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: _____ 03/18/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GHALY, SAMIRA Y
Address: 2830 MUSKY MINT DR
City-St-Zip: LAND O LAKES, FL 34638 US

Title: MGR ( ) Delete
Name: DAWOOD, HANAN Y
Address: 1348 SUMMERLIN DRIVE
City-St-Zip: CLEARWATER, FL 33764 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GHALY, SAMIRA Y
Address: 16007 IVY LAKE DR
City-St-Zip: ODESSA, FL 33556 US

Title: MGR (X) Change ( ) Addition
Name: DAWOOD, HANAN Y
Address: 16019 IVY LAKE DR
City-St-Zip: ODESSA, FL 33556 US

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: SAMIRA GHALY MGR 03/18/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date