

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000012330

Entity Name: FIRST CITY HOMES, LLC

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

205 WALER WAY, UNIT 2  
ST AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

2802 N. FIFTH ST.  
ST AUGUSTINE, FL 32084 US

**Current Mailing Address:**

205 WALER WAY, UNIT 2  
ST AUGUSTINE, FL 32084 US

**New Mailing Address:**

2802 N. FIFTH ST.  
ST AUGUSTINE, FL 32084 US

FEI Number: 05-0566892

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAURENCE, ROBERT J.L.  
101 BILBAO DRIVE  
ST. AUGUSTINE, FL 32086 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: MGRM  
Name: LAURENCE, ROBERT J L  
Address: 101 BILBAO DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGR  
Name: LAURENCE, ROBERT J F  
Address: 114 SOUTHWIND CIRCLE  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby 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: ROBERT J L LAURENCE

MANA

04/16/2010

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