2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000016174

1. Entity Name
FIRST HARBOR PROPERTIES, LLC

Principal Place of Business	Mailing Address
1525 W. HILLSBOROUGH AVENUE TAMPA, FL 33603 US	1525 W. HILLSBOROUGH AVENUE TAMPA, FL 33603 US

DO NOT WRITE IN THIS SPACE

FILED
Apr 30, 2007 08:00 AM
Secretary of State

04052007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
51-0475032	Not Applicable

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

---

6. Name and Address of Current Registered Agent

REIBER, SAM I ESQ.
3821 HENDERSON BOULEVARD
TAMPA, FL FL

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

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	ARTZIBUSHEV, DIMITRI
STREET ADDRESS	1525 W. HILLSBOROUGH AVENUE
CITY-ST-ZIP	TAMPA, FL 33603
TITLE	MGRM
NAME	WILLENBACKER, MICHAEL A
STREET ADDRESS	1525 W. HILLSBOROUGH AVENUE
CITY-ST-ZIP	TAMPA, FL 33603
TITLE	MGRM
NAME	PAWELKOP, STEVEN C
STREET ADDRESS	3202 W. HARBOR VIEW AVENUE
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000743087
05/15/07-80096-007 50.00

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: _DIMITRI ARTZIBUSHEV, Mgrm._ 1/10/07 813-237-0529

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #