

DOCUMENT# L03000019128

Entity Name: ARDEN FAMILY PROPERTIES, L.L.C.

Current Principal Place of Business:

2629 DELMAR DRIVE
GULF BREEZE, FL 32563

New Principal Place of Business:**Current Mailing Address:**

2629 DELMAR DRIVE
GULF BREEZE, FL 32563

New Mailing Address:

FEI Number: _____ **FEI Number Applied For ()** _____ **FEI Number Not Applicable (X)** _____ **Certificate of Status Desired ()** _____

Name and Address of Current Registered Agent:

KILLINGER, SUE ARDEN
2629 DELMAR DRIVE
GULF BREEZE, FL 32563 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/MEMBERS:

Title: MGR () Delete
Name: KILLINGER, SUE ARDEN
Address: 2629 DELMAR DRIVE
City-St-Zip: GULF BREEZE, FL 32563

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Delete
Name: KILLINGER, DOUGLAS E
Address: 2629 DELMAR DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUE ARDEN KILLINGER MGR 01/06/2005

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