2004 LIMITED LIABILITY COMPANY ANNUAL REPORT						FILED Feb 17, 2004 8:00 am Secretary of State				
DOCUMEN			02-17-2004 90197 020 ****50.00							
1. Entity Name EIGHT HUNDRED EAST, L.L.C.						02-17-200	4 90197	020	30.00	
		· · · · · · · · · · · · · · · · · · ·	100	WTE TENED						
Principal Place of Business 3250 W. NAVY BLVD. PENSACOLA, FL 32505		Mailing Address 3250 W. NAVY BLVD. PENSACOLA, FL 32505			2401172 0					
2. Principal Place of Bu	usiness	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	· · ·		01052004	Chg-LLC	CR2E	083 (10/03)		
City & State	•	City & State			4. FEI Number 4 1−2	107311		· · · · · · · · · · · · · · · · · · ·	oplied For of Applicable	
Zip	Country	Zip	Country	_ ~		f Status Desired -	D =	\$5.00 Add	ditional	
6. Na	me and Address of Current I	Registered Agent	Name		7. Name and a	ddress of New F	Registered	Agent		
BIZZELL, THOMA 3250 W. NAVY BL PENSACOLA, FL		Street	Address (P.	O. Box Number	is Not Acceptabl	e)				
			City				FL	Zip Cod	e	
The above named en	ntity submits this statement for	the purpose of changing its r	egistered office of	or registered	d agent, or both	, in the State of Fl			and accept	
	ped or printed name of registered agent a									
Filing Fe Due by M	e is \$50.00 lay 1, 2004	2 4444405522	F			Florid	a Departn	bayable to hent of Stat		
тle	MANAGING MEMBEI		10. TITLE	MGRM	,	ADDITIONS	CHANGE:	Change	Addition	
AME TREET ADDRESS			NAME STREET ADDRESS	Thom 3250	as M. Bi Navy Bl	vd.		,		
ITY-ST-ZIP TLE		Delete	CITY-ST-ZIP	Pens MGR	acola, F	L 32505		Change	X Addition	
AME TREET ADDRESS			NAME STREET ADDRESS	Robe P.O.	rt Montg Box 310	-				
ITY-ST-ZIP TLE		- Delete	CITY-ST-ZIP	Gulf MGR	Breeze,	FL 3256	<u> </u>	Change	X Addition	
AME	· · · · ·		NAME		j Patel			പ്രംസ്ത്രം		
REET ADDRESS TY+ST-ZIP			STREET ADDRESS CITY-ST-ZIP			undeDrive ach, FL				
TLE Amé		Delete	TITLE NAME		<u></u>	<u> </u>	<u></u>	🔲 Change	Addition	
TREET ADDRESS ITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP							
		Delete	TITLE NAME					Change	Addition	
1										
ME Reet address .	·		STREET ADDRESS CITY-ST-ZIP							
AME IREET ADDRESS . TY-ST-ZIP TLE		Delete	STREET ADDRESS				·	Change	Addition	
AME IREET ADDRESS TY-ST-ZIP TLE IME REET ADDRESS			STREET ADDRESS CITY-ST-ZIP TITLE		(w. 4. 3)		·•	Change	Addition	
ITLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP 1. I hereby certify that indicated on this rep limited liability comm	the information supplied with to port is true and accurate and to any or the receiver or trustee	his filling does not qualify for th	STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	ted in Secti	ion 119.07(3)(i).	Florida Statutes. hat I am a manag	I further ce	tify that the in	formation	
ME REET ADDRESS I'V-ST-ZIP LE ME REET ADDRESS I'V-ST-ZIP I. I hereby certify that	the information supplied with 1 port is true and accurate and t pany or the receiver or trustee	his filing does not qualify for th hat my signature shall have the empowered to execute this re	STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	tted in Secti act as if mac by Chapter	ion 119.07(3)(i), de under oath; 608, Florida St	Florida Statutes. hat I am a manac atutes. 2 / 1 2) 0 4	ging memb	tily that the iner or manage	formation r of the	