


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90033 014 ***138.75

DOCUMENT # L03000057201	
1. Entity Name SAF LLC	

Principal Place of Business 2801 MOSS GROVE BOULEVARD ORLANDO, FL 32807	Mailing Address 2801 MOSS GROVE BOULEVARD ORLANDO, FL 32807
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent	
FLANAGAN, SCOTT A. 2801 MOSS GROVE BOULEVARD ORLANDO, FL 32807	

7. Name and Address of New Registered Agent	
Name <i>MARK C. HUNT</i>	
Street Address (P.O. Box Number is Not Acceptable) <i>7811 CANYON LAKE CIRCLE</i>	
City <i>ORLANDO</i>	FL Zip Code <i>32835</i>

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 <i>Mark C. Hunt</i>	DATE <i>4-24-08</i>

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FLANAGAN, SCOTT A 2801 MOSS GROVE BOULEVARD ORLANDO, FL 32807 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLANAGAN, PHYLLIS J 2801 MOSS GROVE BOULEVARD ORLANDO, FL 32807 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>99 RIVERWOOD GLEN DALLAS, GA 30157</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <i>99 RIVERWOOD GLEN DALLAS, GA 30157</i>
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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 <i>Scott A. Flanagan</i>	DATE <i>4-24-08</i> DAYTIME PHONE # <i>407-657-4793</i>

60034513



04212008 Chg-LLC CR2E083 (12/06)

4. FEI Number
55-0854689

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

7. Name and Address of New Registered Agent

Name *MARK C. HUNT*
Street Address (P.O. Box Number is Not Acceptable)
7811 CANYON LAKE CIRCLE
City *ORLANDO* FL Zip Code *32835*

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SIGNATURE *Mark C. Hunt* DATE *4-24-08*

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