2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 21, 2008 8:00 am
Secretary of State
03-21-2008 90117 006 ***138.75

60016245

02042008 Chg-LLC CR2E083 (12/06)

DOCUMENT # L04000017310

1. Entity Name
2600 BLOCK, LLC

Principal Place of Business	Mailing Address
13350 METRO PKWY SUITE 102 FT.MYERS, FL 33966	C/O ROBERT D. ROYSTON, JR. P.O. DRAWER 60205 FORT MYERS, FL 33906

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
	13350 Metro Pkwy
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite 102
City & State	City & State Ft. Myers, FL 33966
Zip / Country	Zip / Country

4. FEI Number 87-0724753 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROYSTON, ROBERT D JR
12670 NEW BRITTANY BLVD., STE. 101
FORT MYERS, FL 33907

7. Name and Address of New Registered Agent

Name: Stan Stouder
Street Address (P.O. Box Number is Not Acceptable): 13350 Metro Pkwy
Suite 102
City: Ft.Myers FL Zip Code 33966

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: Stan Stouder M/M — 2/6/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	STOUDER, STANLEY A		NAME		
STREET ADDRESS	13350 METRO PKWY SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	FT.MYERS, FL 33966		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
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TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: Stan Stouder M/M — 2/6/08 — 239-481-3800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #