

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023663

Entity Name: 8109 MLK, LLC

FILED
Jan 07, 2008
Secretary of State

Current Principal Place of Business:

8109 EAST MARTIN LUTHER KING BLVD
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

8109 EAST MARTIN LUTHER KING BLVD
TAMPA, FL 33619

New Mailing Address:

FEI Number: 42-1629070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, SHIRLEY
8109 EAST MARTIN LUTHER KING BOULEVARD
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

BIRES, CINDY
8109 EAST MARTIN LUTHER KING BOULEVARD
TAMPA, FL 33619 US

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: CINDY BIRES

01/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RAY, SHIRLEY
Address: 8109 EAST MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33619

Title: MGR () Delete
Name: BIRES, CINDY
Address: 8109 EAST MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33619

Title: MGR () Delete
Name: GILMORE, MICHAEL
Address: 8109 EAST MARTIN LUTHER KING BLVD
City-St-Zip: TAMAPA, FL 33619

Title: MGR () Delete
Name: BIRES, KEN
Address: 8109 EAST MARTIN LUTHER KING BLVD
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CINDY BIRES

MGR

01/07/2008

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