## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L04000023880**

1. Entity Name

CENTURY NATIONWIDE PROPERTIES, LLC



FILED
May 15, 2007 08:00 A
Secretary of State

Principal Place of Business

Mailing Address

315 N. ATLANTIC AVENUE DAYTONA BEACH, FL 32118

315 N. ATLANTIC AVENUE DAYTONA BEACH, FL 32118



DO NOT WRITE IN THIS SPACE

05102007 No Chg-LLC CR2E

CR2E083 (11/05)

4. FEI Number Applied For Not Applied Solution Status Desired Status Desired Solution Solutio

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

GORNTO, L.A. JR ESQ 149 S. RIDGEWOOD AVENUE, SUITE 550 DAYTONA BEACH, FL 32114

## DO NOT WRITE IN THIS SPACE

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

\_\_\_\_\_\_

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by September 14, 2007

U00000764492 95/30/07-80065-008 50.00

MANAGING MEMBERS/MANAGERS 9. IME ANDERSON, GEORGE D NAME STREET ADDRESS 315 N. ATLANTIC AVENUE CITY-ST-ZIP DAYTONA BEACH, FL 32118 TITLE NAME COOK, DOUGLAS M POST OFFICE BOX 7407 STREET ADDRESS DAYTONA BEACH, FL 32116 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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11. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

JRE: JULY & GARDEN BERNESENTATIVE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REFRESENTATIVE

5-10-07

Dale

Daytime Phone #