2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000034098

1. Entity Name 100 TURNER STREET, LLC



FILED Jan 25, 2008 08:00 Al Secretary of State

Principal Place of Business

100 TURNER STREET CLEARWATER, FL 33756 Mailing Address

100 TURNER STREET CLEARWATER, FL 33756



01162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2419132 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WARD, R. CARLTON ESQ. RICHARDS, GILKEY, FITE, ET AL. 1253 PARK STREET CLEARWATER, FL 33756

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

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

96969798696 -- 200709 -- 200399

| 9 | MANAGING MEMBERS/MANAGERS | | |
|---------------------------------------|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CONNELLY, JOHN P 100 TURNER STREET CLEARWATER, FL 33756 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZiP | | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | | |

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information extrahed 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

SHADERE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-22-08

727-447-1121

Daytime Phone 4