

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90121 041 ***138.75

DOCUMENT # L04000035685

1. Entity Name

SAN GABRIEL FAMILY ESTATES, LLC



Principal Place of Business

**1206 E RIDGWOOD ST
ORLANDO, FL 32803**

Mailing Address

**1022 NORTHSIDE DRIVE
SUITE B
ATLANTA, GA 30318**



01312008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DELOACH BRYANT, CARLA ESQUIRE
1206 EAST RIDGEWOOD STREET
ORLANDO, FL 32803**

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HUTTO, K
STREET ADDRESS	1022 NORTHSIDE DRIVE
CITY-ST-ZIP	ATLANTA, GA 30318

TITLE	
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IN THIS SPACE**

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