

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048206

FILED
Apr 27, 2009
Secretary of State

Entity Name: FAMILY TIDES INVESTMENTS, LLC

Current Principal Place of Business:

339 NORTH JACKSON STREET
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13798
TALLAHASSEE, FL 32317

New Mailing Address:

FEI Number: 03-0545056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILL, BRADLEY R
127 WILL ROAD
MONTICELLO, FL 32344 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WILL, BRADLEY R
Address: 127 WILL ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: MGR () Delete
Name: WILL, BRIAN K
Address: 339 NORTH JACKSON STREET
City-St-Zip: QUINCY, FL 32351

Title: MGRM () Delete
Name: WILL, DOUGLAS A
Address: 12718 LAUREL HILL DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM () Delete
Name: GENTRY, RICHARD
Address: 2305 BRAEBURN CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: HOLLEY, DOUGLAS MARK
Address: 9919 SUGAR MILL DRIVE
City-St-Zip: BRADENTON, FL 34212

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:

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: BRIAN K. WILL

MGRM

04/27/2009

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