

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048524

FILED  
Mar 10, 2009  
Secretary of State

**Entity Name:** 169 AUGUSTINE ISLAND WAY, LLC

**Current Principal Place of Business:**

4515 SUNBERRY DRIVE  
GAMBER, MD 21048

**New Principal Place of Business:**

**Current Mailing Address:**

4515 SUNBERRY DRIVE  
GAMBER, MD 21048

**New Mailing Address:**

FEI Number: 20-1373184

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

F&L CORP.  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202 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: MR. ( ) Delete  
Name: SCHEINER, CRAIG G  
Address: 4515 SUNBERRY DRIVE  
City-St-Zip: GAMBER, MD 21048

**ADDITIONS/CHANGES:**

Title: MR. (X) Change ( ) Addition  
Name: CRAIG SCHEINER,  
Address: 4515 SUNBERRY DRIVE  
City-St-Zip: GAMBER, MD 21048

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: CRAIG SCHEINER

MGRM

03/10/2009

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