

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L04000061264 1. Entity Name AMELIA TENNIS VILLAS DEVELOPMENT COMPANY LLC |  |
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|---|---|
| Principal Place of Business 1501 LEWIS STREET AMELIA ISLAND, FL 32034 | Mailing Address 1501 LEWIS STREET AMELIA ISLAND, FL 32034 |
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DO NOT WRITE IN THIS SPACE



03312008No Chg-LLC

CR2E083 (12/07)

| | |
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| 4. FEI Number 34-2017015 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

**F&L CORP.
ONE INDEPENDENT DRIVE STE. 1300
JACKSONVILLE, FL 32202**

**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 _____


**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM AMELIA TENNIS VILLAS INVESTMENT CO LLC 1501 LEWIS STREET AMELIA ISLAND, FL 32034 |
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04/25/08-90041-006 143.75

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:  **Jack B. Healan, Jr.** **4/01/08** **904-261-6161**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #