

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068913

FILED
Jul 07, 2007
Secretary of State

Entity Name: SOUTHERN CUSTOM LIVING, LLC

Current Principal Place of Business:

15049 TAMARIND CAY CT
1301
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15049 TAMARIND CAY CT
1301
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 30-0273953 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RASHLEY, DENISE R
15049 TAMARIND CAY CT
1301
FT MYERS, FL 33908 US

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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: RASHLEY, DENISE R
Address: 15049 TAMARIND CAY CT #1301
City-St-Zip: FT MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: JONES, MICHAEL E
Address: 3622 MARGINA CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34134

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: DENISE R. RASHLEY

MGRM

07/07/2007

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