2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000075891

Entity Name

CORDOVA STREET PROPERTIES, LLC



Principal Place of Business

44 AVENIDA MENEDEZ ST. AUGUSTINE, FL 32084 Mailing Address

44 AVENIDA MENEDEZ ST. AUGUSTINE, FL 32084

FILED Mar 10, 2008 08:00 AN Secretary of State



03032008No Chg-LLC

CR2E083 (12/07)

NOT APPLICABLE	Not Applicable
4. FEI Number	Applied For

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ARBIZZANI, L JOHN 44 AVENIDA MENENDEZ SAINT AUGUSTINE, FL 32084 DO NOT WRITE IN THIS SPACE

	The above na the obligation				tatement for	the purp	ose of c	hangin	g its reg	istered offic	e or register	cd agent	or both	, in the	State of	Florida.	I am familia	ar with, and	accept
SI	GNATURE	1.	2 + 3 3	, <u>, , , , , , , , , , , , , , , , , , </u>							. ,	÷	٠, ،	٠.	2				

(NOTE, Registered Agent signature required when reinstaing)

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

90 (a 2) N	MANAGING MEMBERS/MANAGERS	U00000854019
ITILE P NAME ARBIZZANI, L J STREET ADDRESS 44 AVENIDA MI CITY-SI-ZIP SAINT ALIGUST		00000854019 03/26/08-80088-023 138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TINE, FE 32004	
TITLE ::AME STREET ADDRESS CITY-S1-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marie Control Control Control Control	
TITLE NAME SIREET ADDRESS CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filling 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 TO SULLAN

4. JOHNARBIZZANI

3.4.08 904.829.5578

Date

Daylime Phone #