

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010772

Entity Name: GRAND 14, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

10109 NORTH WILLOW AVE.
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

10109 NORTH WILLOW AVE.
TAMPA, FL 33612

New Mailing Address:

FEI Number: 84-1670487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLEMETSON, ARLENE
8520 N. DEXTER AVE.
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

CLEMETSON, ARLENE
10109 NORTH WILLOW AVENUE
TAMPA, FL 33612 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: ARLENE CLEMETSON

04/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: CLEMETSON, ARLENE
Address: 10109 NORTH WILLOW AVE.
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: CLEMETSON, CAROL
Address: 10109 NORTH WILLOW AVE.
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES:

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: ARLENE CLEMETSON

P

04/29/2008

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