

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # L05000031593

1. Entity Name
BLACKRIVER, L.L.C.



Principal Place of Business
2101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

Mailing Address
2101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176



03042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-2852297

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RAINEY, JOHN A
2101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

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

JOHN A. RAINEY *John A Rainey*

03/04/2008

Signature, typed or printed name of registered agent and title if applicable

(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
MGR
RAINEY, JOHN A
2101 JOHN ANDERSON DRIVE
ORMOND BEACH, FL 32176

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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U00000861667
04/03/08-80018-008 138.75

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IN THIS SPACE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

John A Rainey - JOHN A. RAINEY 03/04/2008 386-44-4843

Date

Daytime Phone #