

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000034696

FILED
Sep 01, 2008
Secretary of State**Entity Name:** STREETSIDE TAMPA, LLC**Current Principal Place of Business:**3708 WEST SWANN AVENUE
SUITE 101
TAMPA, FL 33609 US**New Principal Place of Business:**5339 GULF DRIVE
HOLMES BEACH, FL 34217 US**Current Mailing Address:**3708 WEST SWANN AVENUE
SUITE 101
TAMPA, FL 33609 US**New Mailing Address:**1936 BRUCE B. DOWNS BOULEVARD, #511
WESLEY CHAPEL, FL 33543 US**FEI Number:** 83-0446009**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PEARSON, EMILIA
3708 WEST SWANN AVENUE
SUITE 101
TAMPA, FL 33609 US**Name and Address of New Registered Agent:**SCHLOSSBERG, BLAIR G
5339 GULF DRIVE
HOLMES BEACH, FL 34217 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: BLAIR G. SCHLOSSBERG

09/01/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:Title: MGRM () Delete
Name: SCHLOSSBERG, BLAIR G
Address: 3708 WEST SWANN AVENUE, SUITE 101
City-St-Zip: TAMPA, FL 33609 USTitle: MGRM () Delete
Name: DAVIDSON, DOUGLAS C
Address: 1132 WEST PEACHTREE STREET
City-St-Zip: ATLANTA, GA 30309 USTitle: MGRM () Delete
Name: LEDBETTER, LARRY J
Address: 3708 WEST SWANN AVENUE, SUITE 101
City-St-Zip: TAMPA, FL 33609 USTitle: MGRM () Delete
Name: CHRISTIANSEN, JON P
Address: 3708 WEST SWANN AVENUE, SUITE 101
City-St-Zip: TAMPA, FL 33609 US**ADDITIONS/CHANGES:**Title: MGRM (X) Change () Addition
Name: SCHLOSSBERG, BLAIR G
Address: 5339 GULF DRIVE
City-St-Zip: HOLMES BEACH, FL 34217 USTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: MGRM (X) Change () Addition
Name: LEDBETTER, LARRY J
Address: 32 AEGEAN
City-St-Zip: TAMPA, FL 33606 USTitle: MGRM (X) Change () Addition
Name: GILBERTSON INVESTMEN, TS, LLC
Address: 13050 CURLEY ROAD
City-St-Zip: DADE CITY, FL 33525 US

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: BLAIR G. SCHLOSSBERG

MGRM

09/01/2008

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