


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2008 08:00 A
Secretary of State

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| DOCUMENT # L05000049963 |  |
| 1. Entity Name EDGEWOOD AVENUE INVESTORS, LLC | |

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| Principal Place of Business 1187 COAST VILLAGE ROAD SUITE 1-624 MONTECITO, CA 93108 | Mailing Address 1187 COAST VILLAGE ROAD SUITE 1-624 MONTECITO, CA 93108 |
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01102008 No Chg-LLC CR2E083 (12/07)

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| 4. FEI Number 20-2903260 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

SAMP, GREG
 108 INDIAN HAMMOCK LANE
 PONTE VEDRA BEACH, FL 32082

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 _____ (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 | CEO MILLER, DIANA C 1022 GARCIA ROAD SANTA BARBARA, CA 93103 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRES HERSHKOWITZ, BRIAN F 1022 GARCIA ROAD SANTA BARBARA, CA 93103 |
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 01/16/08-80085-022 143.75

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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: Brian Hershkowitz PRES Date 1/10/08 Daytime Phone # 805-453-6120