

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000066873

FILED
Mar 14, 2008
Secretary of State

Entity Name: OLD OLGA RIVERFRONT, LLC

Current Principal Place of Business:

2240 W. FIRST STREET
SUITE 100
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2240 W. FIRST STREET
SUITE 100
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 20-3276524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADKINS, STEVEN D
2240 W. FIRST STREET
SUITE 100
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADKINS, STEVEN D
Address: 2240 W. FIRST STREET, SUITE 100
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: NEWTON, BRADFORD
Address: 2240 W. FIRST STREET, SUITE 100
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: SCHNEIDER, TOBEY
Address: 2240 W. FIRST STREET, SUITE 100
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: RUTTER, PATRICIA
Address: 2240 W. FIRST STREET, SUITE 100
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVEN D. ADKINS

MGRM

03/14/2008

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