

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069364

FILED
Jan 07, 2008
Secretary of State

Entity Name: CLIFF LAWN INVESTMENTS, LLC

Current Principal Place of Business:

271 PALM AVENUE
BOCA GRANDE, FL 33921

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1356
BOCA GRANDE, FL 33921

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDWELL, BARRY M
271 PALM AVENUE
BOCA GRANDE, FL 33921 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: CALDWELL, BARRY M
Address: 103 HILLWOOD BLVD.
City-St-Zip: NASHVILLE, TN 37205

Title: MGR () Delete
Name: LEVI, ASHLEY C
Address: 102 BELLEBROOK CIRCLE
City-St-Zip: NASHVILLE, TN 37205

Title: MGR () Delete
Name: MADDUX, BARRY C
Address: 147 CHEEK ROAD
City-St-Zip: NASHVILLE, TN 37205

Title: MGR () Delete
Name: COLEMAN, LIZA C
Address: 140 ALTON ROAD
City-St-Zip: NASHVILLE, TN 37205

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: BARRY CALDWELL

MRS.

01/07/2008

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