

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075151

FILED  
Jul 28, 2008  
Secretary of State

Entity Name: SANTA ROSA BUILDERS, LLC

## Current Principal Place of Business:

#7 SEA DUNES COVE  
SANTA ROSA BEACH, FL 32459

## New Principal Place of Business:

395 LOBLOLLY BAY DR  
SANTA ROSA BEACH, FL 32459

## Current Mailing Address:

PO BOX 1610  
SANTA ROSA BEACH, FL 32459

## New Mailing Address:

395 LOBLOLLY BAY DR  
SANTA ROSA BEACH, FL 32459

FEI Number: 20-3230465      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

CARRON, PHILLIP  
#7 SEA DUNES COVE  
SANTA ROSA BEACH, FL 32459      US

## Name and Address of New Registered Agent:

MARTIN, GARY  
395 LOBLOLLY BAY DR  
SANTA ROSA BEACH, FL 32459      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: GARY MARTIN

07/28/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MARTIN, GARY  
Address: 29 WHITE CAP WAY  
City-St-Zip: DESTIN, FL 32459 US

Title: MGRM (X) Delete  
Name: CARRON, PHILLIP  
Address: #7 SEA DUNES COVE  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MARTIN, GARY  
Address: 395 LOBLOLLY BAY DR  
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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: GARY MARTIN

MGRM

07/28/2008

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