

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90350 023 ****50.00

DOCUMENT # L05000085953

1. Entity Name
PIER POINT 508, LLC



Principal Place of Business
**580 ATLANTIC BOULEVARD
NEPTUNE BEACH, FL 32266**

Mailing Address
**580 ATLANTIC BOULEVARD
NEPTUNE BEACH, FL 32266**

60037104



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04132007 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number

20-3450562

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**AHERN, FRED L JR.
2215 SOUTH THIRD STREET
SUITE 101
JACKSONVILLE BEACH, FL 32250**

7. Name and Address of New Registered Agent

Name **Proctor, Stephen P.**

Street Address (P.O. Box Number is Not Acceptable)

580 Atlantic Blvd.

City

Neptune Beach

FL

Zip Code

32266

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **PROCTOR, STEPHEN P**
STREET ADDRESS **580 ATLANTIC BOULEVARD**
CITY-ST-ZIP **NEPTUNE BEACH, FL 32266**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☐ Change ☒ Addition
NAME **Proctor, Jack F.**
STREET ADDRESS **4495 Goldcrest Lane**
CITY-ST-ZIP **Jax, FL 32224**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **Proctor, Betty Lee**
STREET ADDRESS **4495 Goldcrest Lane**
CITY-ST-ZIP **Jax, FL 32224**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **Proctor, Joseph F.**
STREET ADDRESS **1344 Pinewood Road**
CITY-ST-ZIP **Jax Beach, FL 32250**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **Proctor, Elizabeth W.**
STREET ADDRESS **1012 Buddy Court Lane**
CITY-ST-ZIP **Neptune Beach, FL 32266**

TITLE **MGRM** ☐ Change ☒ Addition
NAME **Averett, Christine**
STREET ADDRESS **2529 Newport Ave.**
CITY-ST-ZIP **Cardiff by the Sea, CA 92007**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

04-13-07 (904) 249-0179

Date

Daytime Phone #