

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093830

FILED
Feb 25, 2009
Secretary of State

Entity Name: DRIFTWOOD POINT, LLC

Current Principal Place of Business:

2396 DRIFTWOOD POINT LANE
CARRABELLE, FL 32322

New Principal Place of Business:

Current Mailing Address:

3649 LETITIA LANE
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 20-3541952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, STEVE M III
215 DELTA COURT
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: JOHN P. CADE

02/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CADE, JOHN P
Address: 3649 LETITIA LANE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: CADE, ROBIN
Address: 3649 LETITIA LANE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM () Delete
Name: PARTIN, RICHARD A
Address: 2909 LASSWADE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGRM (X) Delete
Name: DETERS, SHERRY
Address: 3068 IRONWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309 US

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: DETERS, SHERRY
Address: 3068 IRONWOOD DRIVE
City-St-Zip: TALLAHASSEE, FL 32309 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: JOHN P. CADE

MR.

02/25/2009

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