

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 10, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000102679**

1. Entity Name  
**THE PROPERTY OWNERS OF CYBONEY RV, LLC**



Principal Place of Business

**2078 SCENIC GULF DRIVE  
MIRAMAR BEACH, FL 32550**

Mailing Address

**PO BOX 6459  
MIRAMAR BEACH, FL 32550**



01082008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-3925835**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**SOMERVILLE, ROBERT  
2078 SCENIC GULF DRIVE  
CYBONEY RV LOT 14  
MIRAMAR BEACH, FL 32550**

**DO NOT WRITE  
IN THIS SPACE**

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

*Bernard McDermott*

(NOTE: Registered Agent signature required when reinstating)

*1-8-08*  
DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

000000779220  
01/11/08-80029-003 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
SOMERVILLE, ROBERT  
2078 SCENIC GULF DRIVE, LOT 14  
MIRAMAR BEACH, FL 32550**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
EDWARDS, SANDRA  
2078 SCENIC GULF DR LOT 21  
MIRAMAR BEACH, FL 32550**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
MCDERMOTT, BERNARD  
2078 SCENIC GULF DR LOT 11  
MIRAMAR BEACH, FL 32550**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Bernard McDermott*

*1-8-08*

*314 607 8180*

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

Date

Daytime Phone #