

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105898

Entity Name: URBANDIGGS LLC

FILED
Mar 14, 2008
Secretary of State

Current Principal Place of Business:

35 CARIBBEAN WAY
PONCE INLET, FL 32127

New Principal Place of Business:

Current Mailing Address:

35 CARIBBEAN WAY
PONCE INLET, FL 32127

New Mailing Address:

FEI Number: 80-0092074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KWIATKOUSKI, DAVID J
35 CARIBBEAN WAY
PONCE INLET, FL 32127 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: KWIATKOUSKI, SHELLY A
Address: 285 S. HALIFAX DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGRM () Delete
Name: KWIATKOUSKI, DAVID J
Address: 35 CARIBBEAN WAY
City-St-Zip: PONCE INLET, FL 32127

Title: MGRM (X) Delete
Name: KWIATKOUSKI, DAVID M
Address: 26630 SHADOW WOOD DR
City-St-Zip: RANCHO PALOS VERDES, CA 90275

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:

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: DAVID J KWIATKOUSKI

MGRM

03/14/2008

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