## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000111306

Entity Name: SUMMERHOUSE 729, L.L.C.

FILED Apr 25, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

729 DRIFTWOOD CIRCLE PONTE VEDRA BEACH, FL 32082

**Current Mailing Address: New Mailing Address:** 

PO BOX 330213 729 DRIFTWOOD CIRCLE

PONTE VEDRA BEACH, FL 32082 ATLANTIC BEACH, FL 32233 US

FEI Number: 20-3901937 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HEEKIN, T. GEOFFREY ESQ. ONE INDEPENDENT DRIVE, SUITE 2200 JACKSONVILLE, FL 32202

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: (X) Change ( ) Addition () Delete

SNYDER, LORRIE A SNYDER, LORRIE A Name: Name: Address: 729 DRIFTWOOD CIRCLE Address: PO BOX 330213

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: ( ) Delete Title: ( ) Change (X) Addition

Name: Name: SNYDER, ALAN K Address: Address: PO BOX 330213

City-St-Zip: City-St-Zip: ATLANTIC BEACH, FL 32233 US

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: LORRIE A SNYDER 04/25/2008