

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000111835

FILED
Mar 31, 2008
Secretary of State

Entity Name: CHARLESTON CORNERS, LLC

Current Principal Place of Business:

2419 E COMMERCIAL BLVD STE 100
FT. LAUDERDALE, FL 33308

New Principal Place of Business:

5901 US H WY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652

Current Mailing Address:

2419 E COMMERCIAL BLVD STE 100
FT. LAUDERDALE, FL 33308

New Mailing Address:

5901 US H WY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652

FEI Number: 20-3858493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLODIG, GREGORY J
100 W. CYPRESS CREEK ROAD STE 750
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

QUALIFIED PROPERTY MANAGEMENT
5901 US HWY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652 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: MARY WHITE

03/31/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HAIENDA HOLDINGS, LL, C
Address: 815 N.W 57TH AVENUE STE 405
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: J&D CHARLESTON CORNE, RS, LLC
Address: 2419 E COMMERCIAL BLVD STE 100
City-St-Zip: FT. LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

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: MARY WHITE

CEO

03/31/2008

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