

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113241

FILED
Apr 17, 2008
Secretary of State

Entity Name: THE LOFTS OF MELBOURNE, LLC

Current Principal Place of Business:

812 E STRAWBRIDGE AVENUE
MELBOURNE, FL 32901 US

New Principal Place of Business:

Current Mailing Address:

7617 LITTLE RIVER TURNPIKE
SUITE 240
ANNANDALE, VA 22003 US

New Mailing Address:

FEI Number: 20-5618045 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FLOTZ, PETER
120 MAR LEN DRIVE
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

FLOTZ, PETER
812 E STRAWBRIDGE AVE
MELBOURNE, FL 32901 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: PETER FLOTZ

04/17/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEGACY SOUTHEAST INV, ESTMENTS, LLC
Address: 812 E STRAWBRIDGE AVENUE
City-St-Zip: MELBOURNE, FL 32901 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: KROCKER, CHARLES S
Address: 7617 LITTLE RIVER TURNPIKE-STE 240
City-St-Zip: ANNANDALE, VA 22003

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: CHARLES S KROCKER

MGRM

04/17/2008

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