## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000116078

Title:

Name:

Address:

City-St-Zip:

MGRM

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JACKSONVILLE, FL 322569102

7820 BAYMEADOWS RD., E. APT 615

ADDISON, DANNY N II

Entity Name: FIRST COAST FONDUE, LLC

FILED May 08, 2007 Secretary of State

() Change () Addition

**Current Principal Place of Business: New Principal Place of Business:** 2149 SWALLOWTAIL LANE ST. AUGUSTINE, FL 32092 **Current Mailing Address: New Mailing Address:** 2149 SWALLOWTAIL LANE 7860 GATE PKWY SUITE 101 ST. AUGUSTINE, FL 32092 JACKSONVILLE, FL 32256 FEI Number: 20-4075037 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KELLISON, LEE G ESQ. 6817 SOUTHPOINT PARKWAY 603 JACKSONVILLE, FL, FL 32216 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition ROBIE, MICHAEL P Name: Name: Address: 2149 SWALLOWTAIL ANE Address: City-St-Zip: ST.AUGUSTINE, FL 32092 City-St-Zip:

Title:

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: DANNY N. ADDISON II MGRM 05/08/2007