

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117438

Entity Name: CHICKADEE LC

FILED
Jan 26, 2008
Secretary of State

Current Principal Place of Business:

1 SLEIMAN PARKWAY
SUITE 280
JACKSONVILLE, FL 32216

New Principal Place of Business:

5167 REDBIRD RD.
ST. AUGUSTINE, FL 32080

Current Mailing Address:

1 SLEIMAN PARKWAY
SUITE 280
JACKSONVILLE, FL 32216

New Mailing Address:

5167 REDBIRD RD.
ST. AUGUSTINE, FL 32080

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEEKIN, ROBERT A
1 SLEIMAN PARKWAY
SUITE 280
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

PONCE, DAVID M
5167 REDBIRD RD.
ST. AUGUSTINE, FL 32080 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: DAVID M. PONCE

01/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PONCE, DAVID SR
Address: 5167 REDBIRD RD
City-St-Zip: SAINT AUGUSTINE, FL 32080

ADDITIONS/CHANGES:

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 M. PONCE

PRES

01/26/2008

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