2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000121945

Entity Name: CLASSIC INVESTMENTS OF FLORIDA, LLC

FILED Jun 25, 2009 Secretary of State

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

205 BROOKS ST. 205 BROOKS ST. SE

SUITE 201 SUITE 201

FORT WALTON BEACH, FL 32548 FORT WALTON BEACH, FL 32548

Current Mailing Address: New Mailing Address:

205 BROOKS ST. 205 BROOKS ST. SE

SUITE 201 SUITE 201

FORT WALTON BEACH, FL 32548 FORT WALTON BEACH, FL 32548

FEI Number: 22-3919308 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:

KENT, MICHAEL G KENT, MICHAEL G

205 BROOKS ST STE 201 205 BROOKS ST SE STE 201

FORT WALTON BEACH, FL 32548 US FORT WALTON BEACH, FL 32548 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: 06/25/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 MCEACHERN, CHARLES K
 Name:

 Address:
 4460 LEGENDARY DR. SUITE 300
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:

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

Name: KENT, MICHAEL G Name: KENT, MICHAEL G

Address: 205 BROOKS ST. SUITE 201 Address: 205 BROOKS ST. SE SUITE 201 City-St-Zip: FORT WALTON BEACH, FL 32548 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRM () Delete Title: () Change () Addition

Name:ABT, PETER MName:Address:4460 LEGENDARY DR. SUITE 300Address:

City-St-Zip: DESTIN, FL 32541 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 KEENER, DON A
 Name:

 Address:
 5 PAHOKEE LANE
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 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: MICHAEL G. KENT MGRM 06/25/2009