2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000023

Entity Name: OCEAN SHORE INVESTMENTS, LLC

DAYTONA BEACH, FL 32124

City-St-Zip:

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2601 S ATLANTIC AVE DAYTONA BEACH, FL 32118 **Current Mailing Address: New Mailing Address:** 2601 S ATLANTIC AVE DAYTONA BEACH, FL 32118 FEI Number: 43-2097787 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: EDWARDS, DAVID J STEPHENS, WILLIAM F 6 EAST BAY STREET, STE. 500 125 OCEAN SHORE BLVD. US JACKSONVILLE, FL 32202 ORMOND BEACH, FL 32176 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: WILLIAM F, STEPHENS 04/24/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete STEPHENS, WILLIAM F Name: Name: 125 OCEAN SHORE BLVD Address: Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition EDWARDS, SPENCE J Name: Name: Address: 6534 CHRISTOPHER PT. RD. Address: City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TURK, ROSEMARY P Name: Name: Address: 10201 E 89TH ST N Address: City-St-Zip: OWASSO, OK 74055 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition STEPHENS, JILLIAN M Name: Name: Address: 125 OCEAN SHORE BLVD. Address: City-St-Zip: ORMOND BEACH, FL 32176 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WOODFINE, JOSEPHINE J Name: Name: 5946 BOGGSFORD RD Address: Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: Title: () Delete Title: () Change () Addition RESLAN, GHASSAN R Name: Name: Address: 426 BAYBERRY LAKES BLVD Address:

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.

City-St-Zip:

SIGNATURE: WILLIAM F. STEPHENS MGRN 04/24/2009