

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000001392

Entity Name: 301 6TH STREET, LLC

FILED  
Jan 14, 2008  
Secretary of State

**Current Principal Place of Business:**

907 16TH PLACE  
VERO BEACH, FL 32958

**New Principal Place of Business:**

905 16TH PLACE  
VERO BEACH, FL 32960 US

**Current Mailing Address:**

907 16TH PLACE  
VERO BEACH, FL 32958

**New Mailing Address:**

905 16TH PLACE  
VERO BEACH, FL 32960 US

FEI Number: 20-5676733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAWN, RONALD K ESQ  
COLLINS BROWN CALDWELL BARKETT & GARAVAGLI  
756 BEACHLAND BOULEVARD  
VERO BEACH, FL 32963 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM ( ) Delete  
Name: CHILBERG, BARBARA  
Address: 907 16TH PLACE  
City-St-Zip: VERO BEACH, FL 32960

Title: MGRM ( ) Delete  
Name: CHILBERG, STEVEN J  
Address: 907 16TH PLACE  
City-St-Zip: VERO BEACH, FL 32960

**ADDITIONS/CHANGES:**

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

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: STEVEN CHILBERG

MGRM

01/14/2008

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