

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029636

FILED  
Apr 01, 2008  
Secretary of State

**Entity Name:** TURTLE BAY PROPERTY ENTERPRISES VI, LLC

**Current Principal Place of Business:**

117 TURTLE BAY LANE  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

117 TURTLE BAY LANE  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

SHEPPARD, SEAN P ESQ  
SHEPPARD & SHEPPARD, P.A.  
1301 PLANTATION ISLAND DR. S, STE. 204  
ST. AUGUSTINE, FL 32080 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: LIBBY, RONALD T  
Address: 117 TURTLE BAY LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM ( ) Delete  
Name: PEREZ, MYRIAM C  
Address: 117 TURTLE BAY LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

**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: RONALD T. LIBBY

MM

04/01/2008

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