

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044567

FILED
Apr 20, 2009
Secretary of State

Entity Name: Highbrighton Partners East, LLC

Current Principal Place of Business:

5772 TIMUQUANA RD
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

5772 TIMUQUANA RD
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 56-2578677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHROADS, JAMES L
914 ATLANTIC AVENUE
SUITE 2-E
FERNANDINA BEACH, FL 32034 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: MGR () Delete
Name: AGRICOLA, WILLAM
Address: 941 ATLANTIC AVE STE 2A
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGR () Delete
Name: KENYON, MATTHEW E
Address: 5772 TIMUQUANA RD
City-St-Zip: JACKSONVILLE, FL 32210

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: GAYNELLE FLOWERS

MGR

04/20/2009

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