

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000051037

FILED  
Mar 09, 2007  
Secretary of State

Entity Name: SEMPER FIDELIS PROPERTIES, LLC

## Current Principal Place of Business:

4685 95TH STREET NORTH  
ST. PETERSBURG, FL 33708 US

## New Principal Place of Business:

## Current Mailing Address:

6968 122ND WAY NORTH  
SEMINOLE, FL 33772 US

## 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:

HUGHES, GARY L  
6968 122ND WAY NORTH  
SEMINOLE, FL 33772 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: HUGHES, GARY L  
Address: 6968 122ND WAY NORTH  
City-St-Zip: SEMINOLE, FL 33772 US

Title: MGR ( ) Delete  
Name: HUGHES, PATRICIA J  
Address: 6968 122ND WAY NORTH  
City-St-Zip: SEMINOLE, FL 33772 US

Title: MGR ( ) Delete  
Name: HUGHES, JEFFREY C CAPT.  
Address: 435 BOCA CIEGA DRIVE  
City-St-Zip: MADEIRA BEACH, FL 33708 US

Title: MGR ( ) Delete  
Name: HUGHES, JENNIFER L  
Address: 4859 BELLA PACIFIC ROW # 127  
City-St-Zip: SAN DIEGO, CA 92109 US

## ADDITIONS/CHANGES:

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

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

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 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: GARY L. HUGHES

MGR

03/09/2007

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