

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000055186

**FILED**  
**Jan 29, 2008**  
**Secretary of State**

**Entity Name:** FLAGLER COMMERCE PARK CENTER, L.L.C.

**Current Principal Place of Business:**

5 UTILITY DRIVE SUITE 14  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

5 UTILITY DRIVE SUITE 14  
PALM COAST, FL 32137

**New Mailing Address:**

**FEI Number:** 20-5024034

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHIUMENTO & ASSOCIATES PA  
4 OLD KINGS ROAD NORTH SUITE B  
PALM COAST, FL 32137 US

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

CHIUMENTO & GUNTARP, P.A.  
4 OLD KINGS ROAD NORTH SUITE B  
PALM COAST, FL 32137 US

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: MICHAEL CHIUMENTO, JR.

01/29/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: EASY DAY HOLDINGS LL, C  
Address: 3971 SOUTH CHINOOK LANE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM ( ) Delete  
Name: MULLEN, MICHAEL  
Address: 1500 LAMBERT AVE  
City-St-Zip: FLAGLER BEACH, FL 32136

**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: MICHAEL MULLEN

MGMR

01/29/2008

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