


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000055250	
1. Entity Name 937 MAIN STREET, LLC	

Principal Place of Business 2270 ATLANTIC BLVD., SUITE 100 NEPTUNE BEACH, FL 32266	Mailing Address 2270 ATLANTIC BLVD., SUITE 100 NEPTUNE BEACH, FL 32266
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DO NOT WRITE IN THIS SPACE



05062008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4956060	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

8. Name and Address of Current Registered Agent

SORRELL, MARY C
 2275 ATLANTIC BLVD., SUITE 200
 NEPTUNE BEACH, FL 32266

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

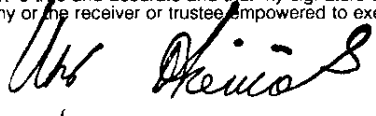
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U00000949289
 06/03/08-80018-021 150.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HIONIDES, CHRIS 2270 ATLANTIC BLVD., SUITE 100 NEPTUNE BEACH, FL 32266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HIONIDES, CHRIS 2275 ATLANTIC BLVD SUITE 100 NEPTUNE BEACH, FL 32266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CAMPBELL, ERIC 2275 ATLANTIC BLVD SUITE 100 NEPTUNE BEACH, FL 32266
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 

904-241-1501
 5-6-08