

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069056

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: ORMOND BEACH PROPERTIES, LLC

**Current Principal Place of Business:**

8278 A1A SOUTH  
ST AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

8278 A1A SOUTH  
ST AUGUSTINE, FL 32080

**New Mailing Address:**

FEI Number: 20-5194079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DORN, MELINDA  
8278 A1A SOUTH  
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: MGR ( ) Delete  
Name: DORN, THOMAS C SR  
Address: 8278 A1A SOUTH  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: MGRM ( ) Delete  
Name: ZAMRIN, JOSEPH T  
Address: 3015 LAKE ELLEN DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: MGRM ( ) Delete  
Name: KELLER, JANICE  
Address: 3015 LAKE ELLEN DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: MGRM ( ) Delete  
Name: PERKINS, GREGG  
Address: 1750 DOBBS ROAD  
City-St-Zip: ST AUGUSTINE, FL 32084

**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 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: MELINDA DORN

RA

04/30/2008

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