

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000074192

Entity Name: CABBYALVAACRES LLC

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

11300 LINDBERGH BLVD.
SUITE 111
FT. MYERS, FL 33913

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 367658
BONITA SPRINGS, FL 34135

New Mailing Address:

11300 LINDBERGH BLVD.
SUITE 111
FT. MYERS, FL 33913

FEI Number: 20-5275205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CABINESS, DAVE
11300 LINDBERGH
SUITE 111
FT. MYERS, FL 33913 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: MGRM () Delete
Name: CABINESS, DAVE
Address: P.O. BOX 367658
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CABINESS, DAVE
Address: 11300 LINDBERGH BLVD. STE 111
City-St-Zip: FT. MYERS, FL 33913

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: DAVE S CABINESS

MGMR

04/24/2008

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