

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000075353

FILED
Feb 19, 2008
Secretary of State

Entity Name: CHAVIANO PROPERTIES LLC

Current Principal Place of Business:

2007 HICKORY TREE LANE
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2007 HICKORY TREE LANE
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 20-5695714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILBERT, MATTHEW H CPA
2606 CENTENNIAL PLACE
TALLAHASSEE, FL 32308 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: CHAVIANO, PETE
Address: 2007 HICKORY TREE LANE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: CHAVIANO, SUSAN
Address: 2007 HICKORY TREE LANE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: CHAVIANO, MANUEL J
Address: 12727 SW 117 STREET
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: REYES-CHAVIANO, CARMEN
Address: 12727 SW 117 STREET
City-St-Zip: MIAMI, FL 33186

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: MGRM () Change (X) Addition
Name: CHAVIANO, KELLI
Address: 2007 HICKORY TREE LANE
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Change (X) Addition
Name: CHAVIANO, NICHOLAS
Address: 2007 HICKORY TREE LANE
City-St-Zip: TALLAHASSEE, FL 32303

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: PETE CHAVIANO

MGR

02/19/2008

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