

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 31, 2008 8:00 am**  
**Secretary of State**

03-31-2008 90268 022 \*\*\*138.75

DOCUMENT # L06000075845

1. Entity Name  
1ST GRANDE GALLERY, LLC



Principal Place of Business  
3001 1ST AVE SOUTH  
ST. PETERSBURG, FL 33712

Mailing Address  
3001 1ST AVE SOUTH  
ST. PETERSBURG, FL 33712

60018305



2. Principal Place of Business - No P.O. Box #  
7233 8th Ave N.  
Suite, Apt. #, etc.

3. Mailing Address  
7233 8th Ave N.  
Suite, Apt. #, etc.

03262008 Chg-LLC CR2E083 (12/06)

City & State  
St Petersburg FL  
Zip 33710 Country USA

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St Petersburg FL  
Zip 33710 Country USA

4. FEI Number  
20-5328145  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

## 6. Name and Address of Current Registered Agent

REID, RON  
3001 1ST AVE SOUTH  
ST. PETERSBURG, FL 33712

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
7233 8th Ave N.  
City St Petersburg FL Zip Code 33710

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 *Ron Reid*  
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-26-08  
DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**Make check payable to**  
**Florida Department of State**

## 9. MANAGING MEMBERS/MANAGERS

TITLE P  
NAME REID, RON ☐ Delete  
STREET ADDRESS 3001 1ST AVE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG, FL 33712

TITLE VP  
NAME REID, MARY ☐ Delete  
STREET ADDRESS 3001 1ST AVE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG, FL 33712

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

## 10. ADDITIONS/CHANGES

TITLE P ☒ Change ☐ Addition  
NAME Reid, Ron  
STREET ADDRESS 7233 8th Avenue N.  
CITY-ST-ZIP St Petersburg FL 33710

TITLE VP ☒ Change ☐ Addition  
NAME Reid, Mary  
STREET ADDRESS 7233 8th Ave N.  
CITY-ST-ZIP St Petersburg FL 33710

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

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: *Ron Reid*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3-26-08