



**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 06, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L06000104642</b> 1. Entity Name FLORIDA FLATHEAD, LLC	
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Principal Place of Business 120 E. MAIN STREET, SUITE A PENSACOLA, FL 32502	Mailing Address 120 E. MAIN STREET, SUITE A PENSACOLA, FL 32502
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**DO NOT WRITE IN THIS SPACE**



02042008 No Chg-LLC      CR2E083 (12/07)

4. FEI Number 06-1798115	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BOOKMAN, ALAN B 30 SOUTH SPRING STREET PENSACOLA, FL 32502	<b>DO NOT WRITE IN THIS SPACE</b>
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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**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SWAINE, RONALD E 120 MAIN STREET, STE A PENSACOLA, FL 32502
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U00000817656  
02/15/08-80011-014 138.75

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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: Ronald E. Swaine      2/4/08 8504291490  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #

RONALD E. SWAINE