2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000105301

Entity Name
 3253 OLD BARN ROAD WEST, LLC



FILED Feb 25, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

3010 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250

3010 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250



02192008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-8029923

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

PATTERSON, ANDERSON & FELDMAN, P.A. 3010 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250

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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

U00000839678 03/06/08-80018-008 138.75

9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PLATTNER, JURG 3010 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PATTERSON, LAWRENCE R 3010 SOUTH THIRD STREET JACKSONVILLE BEACH, FL 32250			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP				

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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: Saurence A. Pattern.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

February 19, 2008

Daytime Pffon