

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109314

FILED
Jun 02, 2008
Secretary of State

Entity Name: LIFELINE PROPERTY SOLUTIONS, LLC

Current Principal Place of Business:

11548 ALEXIS FOREST DRIVE EAST
JACKSONVILLE, FL 32258 US

New Principal Place of Business:

Current Mailing Address:

11548 ALEXIS FOREST DRIVE EAST
JACKSONVILLE, FL 32258 US

New Mailing Address:

FEI Number: 20-5875001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BARBOUR, SHERRY
11548 ALEXIS FOREST DRIVE EAST
JACKSONVILLE, FL 32258 US

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:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: BARBOUR, SHERRY
Address: 11548 ALEXIS FOREST DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: BARBOUR, GERALD H
Address: 11548 ALEXIS FOREST DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32258 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: LOMAX, LEE
Address: 10063 HEATHER LAKE COURT WEST
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGRM (X) Change () Addition
Name: LOMAX, LEE
Address: 280 ST JOHNS FOREST BLVD
City-St-Zip: JACKSONVILLE, FL 32259 US

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: SHERRY BARBOUR

MGRM

06/02/2008

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