


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000113482 1. Entity Name RED BRICK PROPERTIES OF LAKE CITY, LLC	
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Principal Place of Business 597 NW FAIRWAY DRIVE LAKE CITY, FL 32055 US	Mailing Address 597 NW FAIRWAY DRIVE LAKE CITY, FL 32055 US
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04162008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-5936175	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**COLEMAN, C RANDOLPH
9250 BAYMEADOWS ROAD, SUITE 450
JACKSONVILLE, FL 32256**

**DO NOT WRITE
IN THIS SPACE**

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

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	MGRM MARCARIAN, BERGE 597 NW FAIRWAY DRIVE LAKE CITY, FL 32055
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KASSABIAN, KAREN N 597 NW FAIRWAY DRIVE LAKE CITY, FL 32055
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05/13/08-80022-018 138.75

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:  **BERGE MARCARIAN** 4/18/08 (386) 758-8119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #