2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000121206

1. Entity Name FTBLD LLC



Principal Place of Business

611 NORTH 4TH STREET JACKSONVILLE, FL 32250

Mailing Address

611 NORTH 4TH STREET JACKSONVILLE, FL 32250

FILED

2008 FEB 11 AM 8: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA



01192008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 16-1781793 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, LAWRENCE F 433 HELMSMAN LANE ATLANTIC BEACH, FL 32233

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8	i. 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

9.	9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD TAYLOR, LAWRENCE 433 HELMSMAN LN ATLANTIC BEACH, FL 32233		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE 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:

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

1-31-08

904-241-2030

Daytime Phone