

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000004170

Entity Name: AMBRIDGE COVE, LLC

FILED
Feb 18, 2008
Secretary of State

Current Principal Place of Business:

5500-00 PHILLIPS HWY
JACKSONVILLE, FL 32207 US

Current Mailing Address:

5500-00 PHILLIPS HWY
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

6639 SOUTHPOINT PARKWAY
SUITE 107
JACKSONVILLE, FL 32216 US

New Mailing Address:

6639 SOUTHPOINT PARKWAY
SUITE 107
JACKSONVILLE, FL 32216 US

FEI Number: 20-8353863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAYAR, JAVID
5500-00 PHILLIPS HWY
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

SAYAR, JAVID
6639 SOUTHPOINT PARKWAY
SUITE 107
JACKSONVILLE, FL 32216 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:

02/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SAYAR, JAVID
Address: 5500-00 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SAYAR, JAVID
Address: 6639 SOUTHPOINT PARKWAY, STE 107
City-St-Zip: JACKSONVILLE, FL 32216 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: JAVID SAYAR

MGR

02/18/2008

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