

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009429

Entity Name: IVY LYNN LLC

FILED  
Jan 15, 2008  
Secretary of State

**Current Principal Place of Business:**

1004 RIDGE POINTE COVE  
LONGWOOD, FL 32750

**New Principal Place of Business:**

5051 HIDDEN PATH WAY #103  
SANFORD, FL 32771

**Current Mailing Address:**

1004 RIDGE POINTE COVE  
LONGWOOD, FL 32750

**New Mailing Address:**

5051 HIDDEN PATH WAY #103  
SANFORD, FL 32771

FEI Number: 61-1518691

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GILBERT, IVY  
1004 RIDGE POINTE COVE  
LONGWOOD, FL 32750 US

**Name and Address of New Registered Agent:**

GILBERT, IVY  
5051 HIDDEN PATH WAY #103  
SANFORD, FL 32771 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: IVY GILBERT

01/15/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GILBERT, IVY  
Address: 1004 RIDGE POINTE COVE  
City-St-Zip: LONGWOOD, FL 32750

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GILBERT, IVY  
Address: 5051 HIDDEN PATH WAY #103  
City-St-Zip: SANFORD, FL 32771

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: IVY GILBERT

MS.

01/15/2008

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