

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90087 001 ***138.75
02-18-2008 90087 002 *****5.00

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| DOCUMENT # L07000032461 | |  |
| 1. Entity Name BEARWALLOW MOUNTAIN ROAD, LLC | | |

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| Principal Place of Business 8136 SABEL OAK LANE JACKSONVILLE, FL 32256 | Mailing Address 8136 SABEL OAK LANE JACKSONVILLE, FL 32256 |
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| 2. Principal Place of Business - No P.O. Box # 8136 SABEL OAK LANE | 3. Mailing Address Suite, Apt. #, etc. |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

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| City & State JACKSONVILLE, FL | City & State |
| Zip 32256 | Country USA |

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| 6. Name and Address of Current Registered Agent STEPP, LEWIS VOYNE JR 8136 SABEL OAK LANE JACKSONVILLE, FL 32256 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
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| 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 Lewis Voyné Stepp <small>Signature, typed or printed name of registered agent and title if applicable.</small> | DATE 2-14-08 <small>(NOTE: Registered Agent signature required when reinstating)</small> |

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| FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 | Make check payable to Florida Department of State |
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| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|--|---------------------------------|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
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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: Lewis Voyné Stepp <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> | DATE 2-14-08 DAYTIME PHONE # 904-814-7088 |

30000582



02142008 Chg-LLC CR2E083 (12/06)

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| 4. FEI Number 20-8714908 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |
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