

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000042111

FILED  
Apr 17, 2008  
Secretary of State

**Entity Name:** SALTER FAMILY PROPERTIES, LLC

**Current Principal Place of Business:**

3940 N.W. 16TH BOULEVARD  
BUILDING B  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 357399  
GAINESVILLE, FL 32635

**New Mailing Address:**

**FEI Number:** 26-0146210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALTER, JAMES D  
3940 N.W. 16TH BOULEVARD  
BUILDING B  
GAINESVILLE, FL 32605 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: SALTER PROPERTY MANA, GEMENT, LLC  
Address: 3940 NW 16TH BLVD., BLDG B  
City-St-Zip: GAINESVILLE, FL 32605

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: JAMES D. SATLER

MGRM

04/17/2008

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