2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# L07000047425

Entity Name: LION'S BRIDGE ESTATE, LLC

Current Principal Place of Business:

55 AVISTA CIRCLE
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

Current Mailing Address:

64 GREEN ST.
WARNER ROBINS, GA 31093

New Mailing Address:

FEI Number: 20-8962220 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEPPARD, SEAN P ESQ.
C/O SHEPPARD & SHEPPARD, P.A.
1301 PLANTATION ISLAND DRIVE SOUTH, #204
ST. AUGUSTINE, FL 32080 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: MGRM ( ) Delete
Name: CAIRA, STEVEN M
Address: 221 ROYAL CREST CIR.
City-St-Zip: KATHLEEN, GA 31047

Title: MGRM ( ) Delete
Name: CAIRA, RENEE C
Address: 221 ROYAL CREST CIR.
City-St-Zip: KATHLEEN, GA 31047

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CAIRA, STEVEN M
Address: 64 GREEN ST.
City-St-Zip: WARNER ROBINS, GA 31093

Title: MGRM (X) Change ( ) Addition
Name: CAIRA, RENEE C
Address: 64 GREEN ST.
City-St-Zip: WARNER ROBINS, GA 31093

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: RENEE CAIRA MGRM 01/30/2009

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