

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000054701

Entity Name: FIREBRICK, LLC

FILED
Jan 31, 2008
Secretary of State

Current Principal Place of Business:

48 S.W. 1ST AVENUE
OCALA, FL 34474

New Principal Place of Business:

48 S.W. 1ST AVENUE
OCALA, FL 34471

Current Mailing Address:

48 S.W. 1ST AVENUE
OCALA, FL 34474

New Mailing Address:

48 S.W. 1ST AVENUE
OCALA, FL 34471

FEI Number: 26-0251763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, ROBERT D
954 E. SILVER SPRINGS BLVD.
OCALA, FL 34470 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:

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: DEXHEIMER, AMANDA B
Address: 2309 SE 20TH CIR
City-St-Zip: OCALA, FL 34471

Title: MGRM () Change (X) Addition
Name: DEXHEIMER, PHILIP J
Address: 2309 SE 20TH CIR
City-St-Zip: OCALA, FL 34471

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: AMANDA DEXHEIMER

MGRM

01/31/2008

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