

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000058322

FILED
Feb 12, 2008
Secretary of State

Entity Name: ALTAMONT PROPERTIES, LLC

Current Principal Place of Business:

5115 GENESEE PARKWAY
BROOKELIA, FL 33922

New Principal Place of Business:

8050 BAYSHORE RD
NORTH FORT MYERS, FL 33917

Current Mailing Address:

5115 GENESEE PARKWAY
BROOKELIA, FL 33922

New Mailing Address:

8050 BAYSHORE RD
NORTH FORT MYERS, FL 33917

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYD, JEFFREY D
5115 GENESEE PARKWAY
BROOKELIA, FL 33922 US

Name and Address of New Registered Agent:

BOYD, JEFFREY D
8050 BAYSHORE RD
NORTH FORT MYERS, FL 33917 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: JEFFREY D. BOYD

02/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BOYD, JEFFREY D
Address: 5115 GENESEE PARKWAY
City-St-Zip: BROOKELIA, FL 33922

Title: MGR () Delete
Name: BOYD, STEVEN J
Address: 5115 GENESEE PARKWAY
City-St-Zip: BROOKELIA, FL 33922

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BOYD, JEFFREY D
Address: 8050 BAYSHORE RD
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: MGR (X) Change () Addition
Name: BOYD, STEVEN J
Address: 8050 BAYSHORE RD
City-St-Zip: NORTH FORT MYERS, FL 33917

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: STEVEN J. BOYD

MR

02/12/2008

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