2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2008
Secretary of State

DOCUMENT# L07000059041

Entity Name: OLD HARBOR FINANCIAL LLC

Current Principal Place of Business:

308 MAIN STREET
SAFETY HARBOUR, FL 34695

New Principal Place of Business:

Current Mailing Address:

308 MAIN STREET
SAFETY HARBOUR, FL 34695

New Mailing Address:

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

Name and Address of Current Registered Agent:

GILLINGS, PETER
235 5TH STREET N.
SAFETY HARBOR, FL 34695 US

Name and Address of New Registered Agent:

GILLINGS, PETER
308 MAIN STREET
SAFETY HARBOR, FL 34695 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: PETER GILLINGS 04/04/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: GILLINGS, PETER
Address: 235 5TH STREET N.
City-St-Zip: SAFETY HARBOUR, FL 34695

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

ADDITIONS/CHANGES:

Title: DIR (X) Change ( ) Addition
Name: GILLINGS, PETER
Address: 308 MAIN STREET
City-St-Zip: SAFETY HARBOUR, FL 34695

Title: PRES ( ) Change (X) Addition
Name: GILLINGS, ROBERT
Address: 308 MAIN STREET
City-St-Zip: SAFETY HARBOR, FL 34695

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: PETER GILLINGS DIR 04/04/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date