

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059041

FILED  
Apr 04, 2008  
Secretary of State

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