

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000065298

FILED
Apr 04, 2008
Secretary of State

Entity Name: COLLEGE HARBOR STAFFING, L.L.C.

Current Principal Place of Business:

% LOVE MANAGEMENT COMPANY, INC.
212 SOUTH CENTRAL, SUITE 100
ST. LOUIS, MO 63105

New Principal Place of Business:

212 SOUTH CENTRAL AVENUE
SUITE 301
ST. LOUIS, MO 63105 US

Current Mailing Address:

% LOVE MANAGEMENT COMPANY, INC.
212 SOUTH CENTRAL, SUITE 100
ST. LOUIS, MO 63105

New Mailing Address:

212 SOUTH CENTRAL AVENUE
SUITE 301
ST. LOUIS, MO 63105 US

FEI Number: 26-0425230

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEY, THERESA M ESQ.
FORD, BOWLUS, DUSS, MORGAN, KENNEY, SAFER
10110 SAN JOSE BLVD.
JACKSONVILLE, FL 32257 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: THE ALLEGRO AT COLLE, GE HARBOR, L.L . C.
Address: 212 SOUTH CENTRAL, SUITE 301
City-St-Zip: ST. LOUIS, MO 63105

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THE ALLEGRO AT COLLE, GE HARBOR, L.L . C.
Address: 212 SOUTH CENTRAL, SUITE 301
City-St-Zip: ST. LOUIS, MO 63105 US

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: DAVID L. KIRKLAND

AUTH

04/04/2008

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