

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000069747

FILED
Mar 21, 2008
Secretary of State

Entity Name: LIBERTY GROVES L.L.C.

Current Principal Place of Business:

100 GOLD KEY COURT
NORTH FORT MYERS, FL 33917 US

New Principal Place of Business:

C/O PEDRO DIAZ
521 VAN BUREN UNIT A
FORT MYERS, FL 33916 US

Current Mailing Address:

100 GOLD KEY COURT
NORTH FORT MYERS, FL 33917 US

New Mailing Address:

C/O MARY DIAZ
P.O. BOX 9223
FORT MYERS, FL 33902

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

Name and Address of Current Registered Agent:

DIAZ, PEDRO
100 GOLD KEY COURT
NORTH FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

DIAZ, MARY
521 VAN BUREN STREET
UNIT A
FORT MYERS, FL 33916 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: MARY DIAZ

03/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DIAZ, PEDRO
Address: 100 GOLD KEY COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: MGR () Delete
Name: DIAZ, MARY
Address: 100 GOLD KEY COURT
City-St-Zip: NORTH FORT MYERS, FL 33917

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DIAZ, PEDRO
Address: P.O. BOX 9223
City-St-Zip: FORT MYERS, FL 33902

Title: MGR (X) Change () Addition
Name: DIAZ, MARY
Address: P.O. BOX 9223
City-St-Zip: FORT MYERS, FL 33902

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: MARY DIAZ

MGR

03/21/2008

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