2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2008
Secretary of State

DOCUMENT# L07000073179

Entity Name: OCEAN VIEW ESTATES LOT 5, L.L.C.

Current Principal Place of Business:

3423 NORTH A1A
FLAGLER BEACH, FL 32136

New Principal Place of Business:

3423 N. OCEANSHORE BLVD.
FLAGLER BEACH, FL 32136

Current Mailing Address:

3423 NORTH A1A
FLAGLER BEACH, FL 32136

New Mailing Address:

3423 N. OCEANSHORE BLVD.
FLAGLER BEACH, FL 32136

FEI Number: 42-1747923 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHIUMENTO & GUNTHARP, P.A.
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

CHIUMENTO & GUNTHARP, P.A.
4 OLD KINGS ROAD NORTH
SUITE B
PALM COAST, FL 32137 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: _____ 05/05/2008
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: JOHNSTON, GREGORY A
Address: 3423 NORTH A1A
City-St-Zip: FLAGLER BEACH, FL 32136

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: JOHNSTON, GREGORY A
Address: 3423 N. OCEANSHORE BLVD.
City-St-Zip: FLAGLER BEACH, FL 32136

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: GREGORY A. JOHNSTON MGRM 05/05/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date