2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# L07000079770

Entity Name: C & S PROPERTY MANAGEMENT GROUP, LLC

Current Principal Place of Business:

29 WINDING CREEK WAY
ORMOND BEACH, FL 32174

New Principal Place of Business:

21 HOSPITAL DRIVE
SUITE #260
PALM COAST, FL 32164

Current Mailing Address:

P.O. BOX 730657
ORMOND BEACH, FL 32173

New Mailing Address:

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

Name and Address of Current Registered Agent:

COLLUCCI, NICKOLAS J
67 SOUTH LAKE DRIVE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

STEIN, CHARLES I PRES.
29 WINDING CREEK WAY
ORMOND BEACH, FL 32174 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: CHARLES I STEIN, PRES. 04/21/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

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

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

ADDITIONS/CHANGES:

Title: D ( ) Change (X) Addition
Name: STEIN, CHARLES I PRES.
Address: 29 WINDING CREEK WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Change (X) Addition
Name: COLLUCCI, NICKOLAS J VP
Address: 67 SOUTH LAKE DR
City-St-Zip: PALM COAST, FL 32164

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: CHARLES I STEIN, PRESIDENT D 04/21/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date