

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091218

FILED
Feb 24, 2009
Secretary of State

Entity Name: ST. ISABEL DEVELOPMENT GROUP, LLC

Current Principal Place of Business:

1832 UNIVERSITY BLVD S
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

1832 UNIVERSITY BLVD S
JACKSONVILLE, FL 32216

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:

ENOCH, BRIAN E
1832 UNIVERSITY BLVD S
JACKSONVILLE, FL 32216 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: ENOCH, BRIAN E
Address: 1832 UNIVERSITY BLVD S
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: MGRM () Delete
Name: BROWN, THOMAS R JR
Address: 1832 UNIVERSITY BLVD S
City-St-Zip: JACKSONVILLE, FL 32216 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRIAN E ENOCH

MGRM

02/24/2009

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