FILED
May 19, 2008 8:00 am
Secretary of State
04-18-2008 90157 028 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L07000100354

1. Entity Name
MONTOUR COLONIAL DRIVE, LLC

Principal Place of Business	Mailing Address
% GARY M. MONTOUR ONE INDEPENDENT DR - STE 2401 JACKSONVILLE, FL 32202	% GARY M. MONTOUR ONE INDEPENDENT DR - STE 2401 JACKSONVILLE, FL 32202
2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

04162008 Chg-LLC CR2E083 (12/06)

4. FEI Number 59-2975411 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MONTOUR, GARY M ONE INDEPENDENT DR STE 2401 JACKSONVILLE, FL 32202	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MONTOUR, GARY M ONE INDEPENDENT DR - STE 2401 JACKSONVILLE, FL 32202	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: [signature] Pres 4/16/08 9043581206
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

ATTACHMENT
3000671A

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS
P.O. Box 8700
Tallahassee, Florida 32314

First-Class Mail
U.S. Postage
PAID
State of Florida
84321

ANNUAL REPORT NOTICE

0034081 01 AV 0.191 **AUTO T5 0 1201 32202-501801

MONTOUR COLONIAL DRIVE, LLC
% GARY M. MONTOUR
ONE INDEPENDENT DR - STE 2401
JACKSONVILLE FL 32202-5018

★ DO NOT SEND A CHECK WITH THE POSTCARD, IT WILL DELAY PROCESSING ★

OPTION 3 - ***Receive a form by mail*** - *Allow up to 28 days total processing time.*

- *Detach this postcard.*
- *Enter address to mail report to, if different from preprinted address.*
- *Affix postage on reverse side and mail.*

Document # L07000100354

MONTOUR COLONIAL DRIVE, LLC
% GARY M. MONTOUR
ONE INDEPENDENT DR - STE 2401
JACKSONVILLE FL 32202-5018

Note: This is not a change to the address of record.

CR2E095 - 1M 09/07

MONTOUR REAL ESTATE SERVICES, LLC.
1 INDEPENDENT DR. FL 24
JACKSONVILLE, FL 32202-5038

1162

Date 4/16/08

Pay to the Order of Florida Department of State $ 138.75

One Hundred and Thirty Eight and 75/100 Dollars

Bank of America

For L07000100354