

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105253

FILED
Apr 19, 2008
Secretary of State

Entity Name: FOREST GROVE PARTNERS, LLC

Current Principal Place of Business:

1316 LEWIS TURNER BLVD
LOT #55
FT. WALTON BEACH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

1316 LEWIS TURNER BLVD
LOT #55
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

FEI Number: 26-1248546 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDRINGA, ROBERT J
4488 STAR STREET NORTH
SAINT PETERSBURG, FL 33709 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: LIGHT, EDWIN
Address: 8730 124TH WAY NORTH
City-St-Zip: SEMINOLE, FL 33772 US

Title: MGRM () Delete
Name: LIGHT, KATHERINE
Address: 8730 124TH WAY NORTH
City-St-Zip: SEMINOLE, FL 33772 US

Title: MGRM () Delete
Name: HOSTILO, WAYNE
Address: 219 BEACHVIEW DRIVE
City-St-Zip: FT. WALTON BEACH, FL 32547 US

Title: MGRM () Delete
Name: HOSTILO, LESSIE
Address: 219 BEACHVIEW DRIVE
City-St-Zip: FT. WALTON BEACH, FL 32547 US

Title: MGRM () Delete
Name: LIGHT, OWEN J
Address: 10271 SUGAR CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32514 US

Title: MGRM () Delete
Name: LYONS, DANNY M
Address: 10271 SUGAR CREEK DRIVE
City-St-Zip: PENSACOLA, FL 32514 US

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
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Title: () Change () Addition
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Title: () Change () Addition
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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: EDWIN LIGHT

MGRM

04/19/2008

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