

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105253

FILED  
Jan 31, 2009  
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:

LIGHT, EDWIN E  
8730 124TH WAY N  
SEMINOLE, FL 33772 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: EDWIN E LIGHT

01/31/2009

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  
Name:  
Address:  
City-St-Zip:

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

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: EDWIN E LIGHT

MGRM

01/31/2009

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