

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107492

Entity Name: S CODY ASSOCIATES, LLC

FILED
Jul 21, 2008
Secretary of State

Current Principal Place of Business:

500 BLUFFVIEW DRIVE
BELLEAIR BLUFFS, FL 33770

New Principal Place of Business:

18395 GULF BLVD
103
INDIAN SHORES, FL 33785

Current Mailing Address:

500 BLUFFVIEW DRIVE
BELLEAIR BLUFFS, FL 33770

New Mailing Address:

18395 GULF BLVD
103
INDIAN SHORES, FL 33785

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHIVAS, JAYME S
500 BLUFFVIEW DRIVE
BELLEAIR BLUFFS, FL 33770 US

Name and Address of New Registered Agent:

CHIVAS, JAYME S
18395 GULF BLVD
103
INDIAN SHORES, FL 33785 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:

07/21/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHIVAS, JAYME S
Address: 500 BLUFFVIEW DRIVE
City-St-Zip: BELLEAIR BLUFFS, FL 33770

ADDITIONS/CHANGES:

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: JAYME CHIVAS

MRS

07/21/2008

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