2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2008 8:00 am Secretary of State

DOCUMENT # L07000109512 1. Entity Name THE PRESLEY BUILDING, LLC						04-08-2	008 90041	017 *	**138.75
Principal Place of Business 1309 S.E. 25TH LOOP SUITE 103 OCALA, FL 34471 US		Mailing Address 1309 S.E. 25TH LOOP SUITE 103 OCALA, PL 34471 US					- ### 1/21 0 (1	31 2) f() f 80 1	
2. Principal Pla	ace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03152008	Chg-LLC	CR2E083 (12/06)		
City & State		City & State			4. FEI Numb	137.34	76		oplied For ot Applicable
Zip	Country	Zip	Count	try		of Status Desired	\$5.	00 Adi Require	
	6. Name and Address of Current	Registered Agent		Name	7. Name and	Address of New	Registered Ager	nt	
BARRINEAU, DIANE P 1309 S.E.: 25TH LOOP				Street Address (P.O. Box Number is Not Acceptable)					
SUITE 103 OCALA, FL						·			
				City			FL	Zip Cod	0
	named entity submits this statement fo ons of registered agent.	r the purpose of changing its	registere	d office or registe	ered agent, or bo	oth, in the State of F	lorida. I am fami	iar with,	and accept
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	E: Plagasaraq	Agent signeture require	d when remetating)		DATE		
FILE After May	NOW!!! FEE IS \$138.75 1; 2008 Fee will be \$538.75	,					ke check paya la Department		a
9.	MANAGING MEMBE		10.			ADDITIONS	/CHANGES		
TIFLE NAME STREET ADDRESS CITY-ST-DP	MGRM DIANE P. BARRINEAU REVOCA 2550 S.E. 41ST STREET OCALA, FL 34480	☐ Delete ABLE TRUST					U	Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-DP		☐ Celete			-			Change	Addition
TITLE HAME STREET ADDRESS CITY-SI-ZIP		☐ Delete						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delcae					0	Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-JP		☐ Delete					O	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-78P		□ Delete						Change	☐ Addition
indicated lia!	ertify that the information supplied with on this report is true and accurate end bility company or the receiver or truster. URE: SOMATURE AND TYPED ON PRINTED MAKE C	I that my signature shall have e empowered to execute this	DYA	Llenai Alfact as il i	er 608, Florida	n; that I am a mana Stalutas.	further certify that ging member or 352 Go Dayone	manage	er Of the