

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127816

FILED
Aug 27, 2008
Secretary of State

Entity Name: SAINT MICHAEL'S INVESTMENT, LLC

Current Principal Place of Business:

2227 KENT PLACE
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

2227 KENT PLACE
CLEARWATER, FL 33764

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

BISHARA, MACARI
2227 KENT PLACE
CLEARWATER, FL 33764 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CANTRELL, WILLIAM K
Address: 2227 KENT PLACE
City-St-Zip: CLEARWATER, FL 33764

Title: MGR () Delete
Name: BISHARA, MCARI
Address: 2227 KENT PLACE
City-St-Zip: CLEARWATER, FL 33764

Title: MGR () Delete
Name: BISHARA, MAGED
Address: 2040 GULF BLVD.
City-St-Zip: BELLEAIR BEACH, FL 33786

Title: MGR () Delete
Name: HANNA, ASHRAF
Address: 3509 SHORELINE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR () Delete
Name: HANNA, MIRANDA
Address: 3509 SHORELINE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR () Delete
Name: BISHARA, MAGDA
Address: 2227 KENT PLACE
City-St-Zip: CLEARWATER, FL 33764

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
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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: MACARI BISHARA

MR.

08/27/2008

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