

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000127816

**FILED**  
**Nov 17, 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:** 59-3632649**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BISHARA, MACARI  
2227 KENT PLACE  
CLEARWATER, FL 33764 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:** MGR ( ) Delete  
**Name:** CANTRELL, WILLIAM K  
**Address:** 2227 KENT PLACE  
**City-St-Zip:** CLEARWATER, FL 33764**Title:** MGR (X) Delete  
**Name:** BISHARA, MCARI  
**Address:** 2227 KENT PLACE  
**City-St-Zip:** CLEARWATER, FL 33764**Title:** MGR (X) Delete  
**Name:** BISHARA, MAGED  
**Address:** 2040 GULF BLVD.  
**City-St-Zip:** BELLEAIR BEACH, FL 33786**Title:** MGR (X) Delete  
**Name:** HANNA, ASHRAF  
**Address:** 3509 SHORELINE CIRCLE  
**City-St-Zip:** PALM HARBOR, FL 34684**Title:** MGR (X) Delete  
**Name:** HANNA, MIRANDA  
**Address:** 3509 SHORELINE CIRCLE  
**City-St-Zip:** PALM HARBOR, FL 34684**Title:** MGR (X) Delete  
**Name:** BISHARA, MAGDA  
**Address:** 2227 KENT PLACE  
**City-St-Zip:** CLEARWATER, FL 33764**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** BISHARA, MACARI  
**Address:** 2227 KENT PLACE  
**City-St-Zip:** CLEARWATER, FL 33764**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: MACARI BISHARA

MGRM

11/17/2008

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