

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050020

FILED
Apr 07, 2009
Secretary of State

Entity Name: SECRET SHORES INVESTMENTS LLC

Current Principal Place of Business:

8108 PAUL JONES DRIVE
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

8108 PAUL JONES DRIVE
JACKSONVILLE, FL 32208

New Mailing Address:

POST OFFICE BOX 43573
JACKSONVILLE, FL 32203

FEI Number: 41-2279112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONROE, MARION
831 HURON STREET
JACKSONVILLE, FL 32254 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: MGRM () Delete
Name: FLEMMING, MELVIN A
Address: 8108 PAUL JONES DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: EDWARDS, VICTORIA E
Address: 8108 PAUL JONES DR
City-St-Zip: JACKSONVILLE, FL 32208

Title: MGRM () Change (X) Addition
Name: TRAYLOR, HAZEL L
Address: 8108 PAUL JONES DR
City-St-Zip: JACKSONVILLE, FL 32208

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: MELVIN A FLEMMING

MGRM

04/07/2009

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