

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004276

FILED
Feb 13, 2009
Secretary of State

Entity Name: VILLA SANGRIA-BAYMEADOWS LLC

Current Principal Place of Business:

8775 COSTA VERDE BLVD
407
SAN DIEGO, CA 92122 US

New Principal Place of Business:

8515 COSTA VERDE BLVD
1257
SAN DIEGO, CA 92122 US

Current Mailing Address:

P.O. BOX 928257
SAN DIEGO, CA 92192 US

New Mailing Address:

FEI Number: 95-2699664 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: MINTZ, THEODORE J
Address: 14905 ARROYO ROSITA
City-St-Zip: RANCHO SANTA FE, CA 92067

Title: MGR () Delete
Name: MABIE, WARD A
Address: 8775 COSTA VERDE BLVD., APT 407
City-St-Zip: SAN DIEGO, CA 92122 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MINTZ, THEODORE J
Address: 550 FRONT STREET, APT 2605
City-St-Zip: SAN DIEGO, CA 92101

Title: MGR (X) Change () Addition
Name: MABIE, WARD A
Address: 8515 COSTA VERDE BLVD., APT 1257
City-St-Zip: SAN DIEGO, CA 92122 US

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: WARD A. MABIE

MGR

02/13/2009

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