

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000873

FILED
Mar 02, 2007
Secretary of State

Entity Name: ST. JOHNS BLUFF LODGING, LLC

Current Principal Place of Business:

3162 ST. JOHN'S BLUFF ROAD
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

2839 PACES FERRY ROAD, SUITE 560
ATLANTA, GA 30339

New Mailing Address:

FEI Number: 58-2374196

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAM D. BOWEN
3162 ST. JOHN'S BLUFF ROAD
JACKSONVILLE, FL 32246 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: BOWEN, WILLIAM D
Address: 45 EAGLE DR.
City-St-Zip: TIFTON, GA 31794

Title: MGRM () Delete
Name: LA HOOD, GEORGE J JR.
Address: RT 1 BOX 425
City-St-Zip: VALDOSTA, GA 31602

ADDITIONS/CHANGES:

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 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: WILLIAM D. BOWEN

MGRM

03/02/2007

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