


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 18, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000004185</b> 1. Entity Name <b>AIKEN PROPERTIES LLC</b>	
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Principal Place of Business <b>12765 FOREST HILL BLVD STE 1302</b> <b>WEST PALM BEACH, FL 33414</b>	Mailing Address <b>C/O MARIO G. DE MENDOZA III, PA</b> <b>12765 FOREST HILL BLVD 1302</b> <b>WEST PALM BEACH, FL 33414</b>
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DO NOT WRITE IN THIS SPACE



02222008 No Chg-LLC      CR2E083 (12/07)

4. FEI Number <b>43-1998824</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>DE MENDOZA, MARIO G III PA</b> <b>12765 FOREST HILL BLVD.</b> <b>SUITE 1302</b> <b>WELLINGTON, FL 33414</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	HARTNETT, RICHARD W
STREET ADDRESS	12765 FOREST HILL BLVD STE 1302
CITY-ST-ZIP	WEST PALM BEACH, FL 33414
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE

U00000955534  
07/18/08-80001-026 538.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *X Richard W. Hartnett*      *X 7/15/08 617-478-6504*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #

Richard W. Hartnett, Manager