# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT # L04000016515

1. Entity Name

13791 JETPORT COMMERCE PARKWAY, LLC



Mailing Address

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Principal Place of Business 11751-2 METRO PARKWAY FORT MYERS, FL 33912

11751-2 METRO PARKWAY FORT MYERS, FL 33912

## FILED Mar 26, 2008 08:00 AN Secretary of State



02102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For	
20-26437	43		Not Applicable
5. Certificate of	Status Desired	\$5.00 Fee Rec	Additional

#### 6. Name and Address of Current Registered Agent

BURKS, ROGER 11751-2 METRO PARKWAY FORT MYERS, FL 33912

SIGNATURE: \

# DO NOT WRITE IN THIS SPACE

Date

Daytme Prone #

	named entity submits this statement for the purpose of charions of registered agent.	nging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when retristating)  DATE
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURKS, ROGER 11751-2 METRO PARKWAY FORT MYERS, FL 33912	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURKS, MARY 11751-2 METRO PARKWAY FORT MYERS, FL 33912	U00000870500 04/09/08-80093-011 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
indicated	I on this report is true and accurate and that my signature s	qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath, that I am a managing member or manager of the pre this report as required by Chapter 608. Florida Statutes.