


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT


DOCUMENT # L04000030468 1. Entity Name LEEWARD 1240 PROPERTIES, L.L.C.	
---	---

Principal Place of Business 1240 LEEWARD ROAD VENICE, FL 34293	Mailing Address 296 BECKER ROAD VENICE, FL 34293
--	--

DO NOT WRITE IN THIS SPACE

07 JUL -5 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07052007No Chg-LLC CR2E083 (11/05)

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

6. Name and Address of Current Registered Agent

HUIE, W. GRADY
 143 EAST MIAMI AVENUE
 VENICE, FL 34285

DO NOT WRITE IN THIS SPACE

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 _____

Filing Fee is \$50.00
 Due by September 14, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	REVOCABLE TRUST OF JPG & NWG
STREET ADDRESS	296 BECKER ROAD
CITY - ST - ZIP	VENICE, FL 34293
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DB

DO NOT WRITE IN THIS SPACE

03/07/07--90404--001 **150.00

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: Nancy W. Gould - co-trustee 2-26-07

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