

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000008594

Entity Name: 1004 HIGHWAY 17-92 LLC

**FILED  
Apr 21, 2008  
Secretary of State**

**Current Principal Place of Business:**

**New Principal Place of Business:**

1004 HIGHWAY 17-92  
LONGWOOD, FL 32750

**Current Mailing Address:**

**New Mailing Address:**

1004 HIGHWAY 17-92  
LONGWOOD, FL 32750

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ROPER, MARSHALL  
1004 HIGHWAY 17-92  
LONGWOOD, FL 32750 US

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:**

**ADDITIONS/CHANGES:**

Title: MGR ( ) Delete  
Name: ROPER, MARSHALL  
Address: 1004 HIGHWAY 17-92  
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Delete  
Name: ROPER, CHERI B  
Address: 1004 HIGHWAY 17-92  
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHERI B ROPER

MGR

04/21/2008

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