


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90065 029 ***138.75

DOCUMENT # L05000019363
 1. Entity Name
 DISCULPE ENTERPRISES, LLC



Principal Place of Business 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145	Mailing Address 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145
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60003396



DO NOT WRITE IN THIS SPACE

01212008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2529628	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
 GREUSEL, JAMIE B
 1104 NORTH COLLIER BLVD.
 MARCO ISLAND, FL 34145

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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 _____
Signature, typed or printed name of registered agent and title if applicable

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREUSEL, JAMIE B 1104 NORTH COLLIER BLVD. MARCO ISLAND, FL 34145
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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: Jamie B Greusel Jamie B Greusel 1/21/08 239394811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #