


2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Mar 26, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000077029
1. Entity Name
2209 WEST 21ST STREET LLC



Principal Place of Business
1012 MINNESOTA AVENUE
LYNN HAVEN, FL 32444

Mailing Address
1012 MINNESOTA AVENUE
LYNN HAVEN, FL 32444

DO NOT WRITE IN THIS SPACE



03162008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3093299	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

MURPHY, SUSAN
1012 MINNESOTA AVENUE
LYNN HAVEN, FL 32444

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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 re-registering) DATE _____

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 MURPHY, SUSAN 1012 MINNESOTA AVENUE LYNN HAVEN, FL 32444
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04/09/08-80083-018 138.75

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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: Susan Murphy 3/20/2008 850 271 3566

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