


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 08:00 A
Secretary of State

DOCUMENT # L06000004637

1. Entity Name
 308 EAST 5TH AVENUE LLC



Principal Place of Business 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757	Mailing Address 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757
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DO NOT WRITE IN THIS SPACE



01072008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-8323766	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

CLEMENT, G. EDWARD
 308 EAST FIFTH AVENUE
 MOUNT DORA, FL 32757

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

04/16/08-90058-010 138.75

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	MGR POTTER, DEL G 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CLEMENT, G. EDWARD 308 EAST FIFTH AVENUE MOUNT DORA, FL 32757
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *D. G. W. Cee* 3/31/08

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