## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L99000003895**

1. Entity Name 315 NASA BOULEVARD, L.L.C.



Principal Place of Business

Mailing Address

636 E. MELBOURNE AVE. MELBOURNE, FL 32901 636 E. MELBOURNE AVE. MELBOURNE, FL 32901

## FILED Apr 14, 2008 8:00 am Secretary of State

03-12-2008 90239 042 \*\*\*138.75

30003830



01212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3586399

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

ANDERSON, J. PATRICK 930 S HARBOR CITY BLVD SUITE 505 MELBOURNE, FL 32901

## DO NOT WRITE IN THIS SPACE

SUITE 505 MELBOURNE, FL 32901			IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the purpose of charions of registered agent.	nging its registere	d office or registered agent, or both, in the State	of Florida. I am familiar with, and a	eccept
SIGNATURE			Agent signature required when reinstating)	DATE	_
FiLE After May	! NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75				
9.	MANAGING MEMBERS/MANAGERS			<del>!! '</del>	,
TITLE	MGR		,		
NAME STREET ADDRESS	HYNES, RICHARD A MD 636 E. MELBOURNE AVE		•		
CITY-ST-ZIP	MELBOURNE, FL 32901				
TILE	D			•	
NAME	HYNES, DIANNE L			•	
STREET ADDRESS	636 E. MELBOURNE AVE				
CITY-ST-ZIP	MELBOURNE, FL 32901	<del></del>	· <u>·</u>		İ
TITLE					<del></del>
NAME					
STREET ADDRESS			DO NOT	WRITE	
CITY-ST-ZIP					
TITLE NAME			IN THIS	SPACE	
STREET ADDRESS			-		
CITY-ST-ZIP					
TITLE	*				
NAME					
STREET ADDRESS		•			
CITY-ST-ZIP					
TITLE			·	•	
NAME					

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:	
	$\overline{}$

STREET ADDRESS City-St-ZIP

3-3-08

321-308-3359

Date

Daytime Phone #