


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 06, 2008 08:00 A
Secretary of State

DOCUMENT # L00000014259
 1. Entity Name
LE JEUNE - DOUGLAS INDUSTRIAL PARK, LLC



Principal Place of Business 13105 NW LEJEUNE ROAD OPA LOCKA, FL 33054	Mailing Address 13105 NW LEJEUNE ROAD OPA LOCKA, FL 33054
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01152008No Chg-LLC . CR2E083 (12/07)

4. FEI Number 65-1069413	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
 SEIF, EVAN D
 2800 PONCE DE LEON BLVD., STE. 1125
 MIAMI, FL 33134

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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) 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	MGR HOLLAND, BRIAN 13105 NW LEJEUNE ROAD OPA LOCKA, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHAPLIN, WAYNE 13105 NW LEJEUNE ROAD OPA LOCKA, FL 33054
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 02/14/08-80078-009 138.75

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