

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2007 08:00 A
Secretary of State

DOCUMENT # L00000015842

1. Entity Name

DAVID SANDERSON, LLC



Principal Place of Business

1531 S. TAMiami TRAIL #703
VENICE, FL 34285

Mailing Address

1531 S. TAMiami TRAIL #703
VENICE, FL 34285

DO NOT WRITE IN THIS SPACE



01112007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

65-1069870

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KHLEIF, ROD
1531 S. TAMiami TRAIL #703
VENICE, FL 34285

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	KHLEIF, ROD
STREET ADDRESS	1531 S TAMiami TRAIL, #703
CITY-ST-ZIP	VENICE, FL 34285

TITLE	
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05/01/07-80049-002 50.00

**DO NOT WRITE
IN THIS SPACE**

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

Rod Khleif

4/18/07

Date

941.492.5222

Daytime Phone #