## **2008 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT**

FILED Apr 28, 2008 8:00 am

DOCUMENT # L01000012296  1. Entity Name PROFESSIONAL PLACE, L.L.C.					04-28-2008 90063 018 ***138.75				
7282 55TH AVE EAST 57282 5 SUITE 191 SUITE 19		Mailing Address 57282 55TH AVE EAST SUITE 191 BRADENTON, FL 34203	-				h irdiğ iblik bil	te al nei	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 1282 55th Que East							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01152008	Chg-LLC	CR2E08	3 (12/06)		
City & State _		City & State  Bradeston, FC		4. FEI Numi 59-37			No	plied For t Applicable	
Zip	Country	3423 9	USA USA		e of Status Desired		5.00 Add ee Required		
	6. Name and Address of Current F	Registered Agent		7. Name an	d Address of New Re	egistered Aç	gent		
MARTIN, ROBERT J				Name Street Address (P.O. Box Number is Not Acceptable)					
SUITE 191			Oliver Address	(i .c. box ivairii		,			
BRADENI.	ON, EL 34203		City	FL Zip Code					
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								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									
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	NOWIII FEE IS \$138.75 7 1, 2008 Fee will be \$538.75				Florida	check pa Departme	-	3	
			10.	-		check pa Departme	-	B	
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 I hereby certify that the information indicated on this report is true and limited liability company or the red supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information 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 eiverfor trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP