


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State


DOCUMENT # L01000019433

1. Entity Name
DONNA PROPERTIES, LLC



Principal Place of Business 2575 EDISON AVE JACKSONVILLE, FL 32204	Mailing Address 2575 EDISON AVE JACKSONVILLE, FL 32204
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DO NOT WRITE IN THIS SPACE



04202007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3755857	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

**BENTLEY, DONNA S
 2575 EDISON AVE
 JACKSONVILLE, FL 32204**

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: *John W Bentley* 4/25/07 DATE

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

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

U00000737823
 05/11/07-80043-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DONNA, BENTLEY S 2575 EDISON AVE JACKSONVILLE, FL 32204
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JOHN, BENTLEY W 2575 S. EDISON AVE JACKSONVILLE, FL 32204
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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: *John W Bentley* 4/25/07 (904) 388-8063 DATE Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE