


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 25, 2008 8:00 am**  
**Secretary of State**

03-25-2008 90082 021 \*\*\*138.75

|   |   |
|---|---|
| <b>DOCUMENT # L02000011788</b>                |  |
| 1. Entity Name<br>903-909 CATTLEMAN ROAD, LLC |   |

|   |   |
|---|---|
| Principal Place of Business<br>4131 BOCA POINTE DRIVE<br>SARASOTA, FL 34238 | Mailing Address<br>4131 BOCA POINTE DRIVE<br>SARASOTA, FL 34238 |
|---|---|

|   |   |
|---|---|
| 2. Principal Place of Business - No P.O. Box #<br><i>1330 Main Street</i> | 3. Mailing Address<br><i>1330 Main Street</i> |
| Suite, Apt. #, etc.<br><i># 9</i>   | Suite, Apt. #, etc.<br><i># 9</i>             |
| City & State<br><i>Sarasota FL</i>  | City & State<br><i>Sarasota FL</i>            |
| Zip<br><i>34236</i>   | Country<br><i>USA</i>                         |

00010300



01152008 Chg-LLC CR2E083 (12/06)

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|--|--|
| 4. FEI Number<br>04-3686162  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required |  |

|   |  |
|---|--|
| 6. Name and Address of Current Registered Agent<br><br>MEDLOCK, JESSE<br>4131 BOCA POINTE DRIVE<br>SARASOTA, FL 34238 | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><i>1330 Main Street #9</i><br>City <i>Sarasota</i> FL Zip Code <i>34236</i> |
|---|--|

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

|   |  |
|---|--|
| <b>FILE NOW!!! FEE IS \$138.75</b><br><b>After May 1, 2008 Fee will be \$538.75</b> | <b>Make check payable to</b><br><b>Florida Department of State</b> |
|---|--|

| 9. MANAGING MEMBERS/MANAGERS                   |   | 10. ADDITIONS/CHANGES                          |  |
|--|---|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGR<br>MEDLOCK INVESTMENTS, LLC<br>4131 BOCA POINTE DRIVE<br>SARASOTA, FL 34238 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <i>1330 Main Street #9</i><br><i>Sarasota, FL 34236</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |

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: Jesse Medlock *Jesse medlock* 3-17-08 941-371-6520  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #