

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027883

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: E. BRUCE STRAYHORN P.L.

## Current Principal Place of Business:

2125 FIRST STREET  
SUITE 200  
FORT MYERS, FL 33901

## New Principal Place of Business:

## Current Mailing Address:

2125 FIRST STREET  
SUITE 200  
FORT MYERS, FL 33901

## New Mailing Address:

FEI Number: 03-0508903

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STRAYHORN, E. BRUCE  
2125 FIRST STREET  
SUITE 200  
FORT MYERS, FL 33901 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: STRAYHORN, E. BRUCE  
Address: 2125 FIRST STREET, SUITE 200  
City-St-Zip: FORT MYERS, FL 33901

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: GLENN, LAURA L MGR  
Address: 2125 FIRST STREET, SUITE 200  
City-St-Zip: FORT MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LAURA L. GLENN

MGR

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date