

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028032

FILED
Apr 30, 2008
Secretary of State

Entity Name: STRAYHORN & STRAYHORN, P.L.

Current Principal Place of Business:

2125 FIRST ST., SUITE 200
FT. MYERS, FL 33901

New Principal Place of Business:

2125 FIRST STREET, SUITE 200
FORT MYERS, FL 33901

Current Mailing Address:

PO BOX 1288
FT. MYERS, FL 33902

New Mailing Address:

P.O. BOX 1288
FORT MYERS, FL 33902

FEI Number: 59-0579049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRINGLE, RICHARD W
2125 FIRST ST., SUITE 200
FT. MYERS, FL 33901 US

Name and Address of New Registered Agent:

PRINGLE, RICHARD W
2125 FIRST STREET., SUITE 200
FORT MYERS, FL 33901 US

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:

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

Title: MGRM () Delete
Name: RICHARD W PRINGLE PA,
Address: 2125 FIRST STREET, SUITE 200
City-St-Zip: FORT MYERS, FL 33901

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

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: E. BRUCE STRAYHORN,, P.L.
Address: 2125 FIRST STREET, SUITE 201
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: E. BRUCE STRAYHORN

MGRM

04/30/2008

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