

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000029230

1. Entity Name
LEE J. CROWTHER, SR., LLC



Principal Place of Business
**2543 ROCKFILL ROAD
FORT MYERS, FL 33916**

Mailing Address
**2543 ROCKFILL ROAD
FORT MYERS, FL 33916**

FILED
Jul 11, 2008 08:00 AM
Secretary of State



07072008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
75-3086889

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHIELDS, CHRISTOPHER J ESQUIRE
1833 HENDRY STREET
FORT MYERS, FL 33901**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000954238
07/11/08-80003-017 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CROWTHER, LEE J SR 2543 ROCKFILL ROAD FORT MYERS, FL 33916
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IN THIS SPACE**

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:

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

7/7/08 239-337-1300

Date

Daytime Phone #