

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90179 025 ***138.75

DOCUMENT # L03000002369 1. Entity Name 4TH OF JULY, LLC					
Principal Place of Business 1110 WHITE STREET KEY WEST, FL 33040			Mailing Address 1110 WHITE STREET KEY WEST, FL 33040		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 35-2197438	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent MATTHEESSEN, CHRISTINA 183 VENETIAN WAY SUGARLOAF, FL 33042			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MATTHEESSEN, BRENT 1110 WHITE STREET KEY WEST, FL 33040	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MATTHEESSEN, CHRISTINA 1110 WHITE STREET KEY WEST, FL 33040	☐ Delete			
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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: <i>Christina Matheessen</i>		Date: 4-8-08		Daytime Phone #: 305 294 8089	