


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 23, 2007 08:00 A
Secretary of State

DOCUMENT # L03000004550 1. Entity Name SCOOTER ESCAPES LLC	
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Principal Place of Business 1450 1ST AVE N SAINT PETERSBURG, FL 33705 US	Mailing Address 1450 1ST AVE N SAINT PETERSBURG, FL 33705 US
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DO NOT WRITE IN THIS SPACE



02072007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 05-0561646	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent DENSMORE, CHRIS R 1450 1ST AVE N SAINT PETERSBURG, FL 33705

**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

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DENSMORE, CHRIS R OWNER 1450 1ST AVE N SAINT PETERSBURG, FL 33705
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03/06/07-80006-010 50.00

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

2/21/07

Date

727-946-4990

Daytime Phone #