

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032553

FILED
May 04, 2008
Secretary of State

Entity Name: ACROPOLIS ENTERPRISES, LLC

Current Principal Place of Business:

3217 MORCHESTER LANE
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

PO BOX 7758
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 20-0309620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

STURGES, ERNEST W ESQ
18501 MURDOCK CIRCLE, STE. 501
PORT CHARLOTTE, FL 33948 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ANNIS, MARK
Address: PO BOX 7758
City-St-Zip: NORTH PORT, FL 34287

Title: MGRM () Delete
Name: ANNIS, SOPHIA
Address: PO BOX 7758
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES:

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

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

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: MARK ANNIS

MGRM

05/04/2008

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