


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L03000032695 1. Entity Name BUTWELL AND BUTWELL, LLC	
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Principal Place of Business 611 NESBIT STREET PUNTA GORDA, FL 33950	Mailing Address 611 NESBIT STREET PUNTA GORDA, FL 33950
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**DO NOT WRITE IN THIS SPACE**



01142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0200010	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

BUTWELL, PAUL  
 611 NESBIT STREET  
 PUNTA GORDA, FL 33950

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUTWELL, PAUL G 611 NESBIT ST PUNTA GORDA, FL 33950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BUTWELL, NORMAN J 611 NESBIT ST PUNTA GORDA, FL 33950
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**DO NOT WRITE IN THIS SPACE**

U00000822582  
 02/20/08-80003-018-138.75

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:  Norman Butwell 2/9/08 941-639-3287  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #