


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000042095

1. Entity Name
POWERLINE LOTS LLC



Principal Place of Business 9720 STIRLING RD SUITE 110 COOPER CITY, FL 33024 US	Mailing Address 9720 STIRLING RD SUITE 110 COOPER CITY, FL 33024 US
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DO NOT WRITE IN THIS SPACE



01172008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0353722	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SAMUELSON, WALTER T
 9720 STIRLING RD
 SUITE 110
 COOPER CITY, FL 33024

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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 renewing) 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	MGRM SAMUELSON, WALTER T 12737 EQUESTRIAN TRAIL DAVIE, FL 33330
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SAMUELSON, LUANN M 12475 SW 58TH STREET SW RANCHES, FL 33330
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 01/29/08-80013-016 138.75

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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: *Walter T Samuelson* MGRM 1/18/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #