## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000043694

1. Entity Name
TRAVEL WITH M.E., LLC



FILED Feb 14, 2008 08:00 AN Secretary of State

Applied For

Principal Place of Business

110 SOLANA RD STE 106 PONTE VEDRA BEACH, FL 32082 Mailing Address

110 SOLANA RD STE 106 PONTE VEDRA BEACH, FL 32082



DO NOT WRITE IN THIS SPACE

02052008No Chg-LLC CR2E083 (12/07)

36-4543053 Not Applicable

5. Certificate of Status Desired 55.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DOOLITTLE, MARY-ELLIN 232 PATRICK MILL CIR. PONTE VEDRA BEACH, FL 32082 DO NOT WRITE IN THIS SPACE

4. FEI Number

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

9.

Signature, typed or printed name of registered agent and title if applicable

MANAGING MEMBERS/MANAGERS

(NOTE: Registered Agent signature required when reinstating)

DATE

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

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TITLE NAME STREET ADDRESS	MGRM DOOLITTLE, MARY-ELLIN 232 PATRICK MILL CIR.	
CITY-ST-ZIP	PONTE VEDRA BEACH, FL 32082	
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11. I hereby certify that the information supplied with this filing does not qualify for the ex		

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DO NOT WRITE IN THIS SPACE

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 TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-10-08

904-285.2222

Daytime Phone #