


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000055725	
1. Entity Name 840 MANALAPAN, LLC	

Principal Place of Business 1157 SOUTH STATE ROAD 7 WELLINGTON, FL 33414	Mailing Address 1157 SOUTH STATE ROAD 7 WELLINGTON, FL 33414
--	--

DO NOT WRITE IN THIS SPACE



01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0547692	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TRIPURANENI, KRISHNA
 1157 SOUTH STATE ROAD 7
 WELLINGTON, FL 33414

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 _____

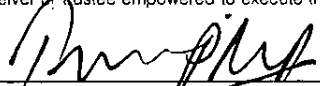
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$536.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TRIPURANENI, KRISHNA TENANTS 1157 SOUTH STATE ROAD 7 WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TRIPURANENI, NIRMALA TENANTS 1157 SOUTH STATE ROAD 7 WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

000000833601
 02/28/08-80021-002 138.75

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:  Date: 2-15-08

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