2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000004399

THE 4100 BUILDING, LLC

FILED Mar 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

4100 RECKER HIGHWAY WINTER HAVEN, FL 33880 4100 RECKER HIGHWAY WINTER HAVEN, FL 33880



03122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For 56-2453296 Not Applicable \$5.00 Additional Fee Required 5. Certificate of Status Desired

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FRASIER, DONALD W 4100 RECKER HIGHWAY WINTER HAVEN, FL 33880

DO NOT WRITE IN THIS SPACE

8. The above the obligat	e named entity submits this statement for the purpose of chartons of registered agent.	anging its registered office or registered agent, or both	h. in the State of Florida. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstaling)	DATE
9	iling Foe is \$50.00 lue by May 1, 2007 MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	FRASIER, DONALD W		
STREET ADDRESS	100 TWIN COVE		
CITY-ST-ZIP	AUBURNDALE, FL 33823	i i	U00000673256
TITLE	MGRM		03/29/07-80022-010 55.00
NAME	RILY, DARRYL L		out had at accome and action

DO NOT WRITE

IN THIS SPACE

11.	I hereby certify that the information supplied with this filling does not qualify for the ex	emptions 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 san	ne 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 a	as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP TITLE

TITLE NAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

250 POST ROAD

POLK CITY, FL 33868