

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000014845

1. Entity Name
SOUTHEAST VOLUSIA BUSINESS PARK LLC



Principal Place of Business

**441-A, UNIT-1
SKYWAY DRIVE
EDGEWATER, FL 32132**

Mailing Address

**P.O. BOX 460
NEW SMYRNA BEACH, FL 32170**



01042007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-2688035

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**POWELL, CHARLES R
441-A, UNIT-1
SKYWAY DRIVE
EDGEWATER, FL 32132**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	POWELL, CHARLES R
STREET ADDRESS	P.O. BOX 460
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32170

TITLE	
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CITY-ST-ZIP	

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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 person or persons authorized to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Charles R. Powell

4-5-07

(386) 423-1222

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

Date

Daytime Phone #