

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # L04000015209

1. Entity Name
CHOCTAW MANAGEMENT SERVICES, LLC



Principal Place of Business
1271 N. EGLIN PKWY
SHALIMAR, FL 32579 US

Mailing Address
PO BOX 942
SHALIMAR, FL 32579 US



04102008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0869682

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEINERS, LOUIS M JR.
200 AVIATION DRIVE
SUITE 2
NAPLES, FL 34104

**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

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

U00000896131
04/24/08-80095-023 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
WATTS, EDWIN
STREET ADDRESS
1271 N. EGLIN PKWY
CITY- ST- ZIP
SHALIMAR, FL 32579

TITLE
NAME
WATTS, MARY
STREET ADDRESS
1271 N. EGLIN PKWY
CITY- ST- ZIP
SHALIMAR, FL 32579

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
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CITY- ST- ZIP

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CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE: *Harry W. Gates*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-10-08

Date

850-244-2066 (x158)

Daytime Phone #