

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90066 035 ***138.75

DOCUMENT # L04000016808



1. Entity Name
BELMAR INVESTMENTS, LLC

Principal Place of Business
3914 W. RIVERSIDE DRIVE
FORT MYERS, FL 33901 US

Mailing Address
3914 W. RIVERSIDE DRIVE
FORT MYERS, FL 33901 US

2. Principal Place of Business - No P.O. Box #
14311 Metropolis Ave
Suite, Apt. #, etc. Suite 101

3. Mailing Address
14311 Metropolis Ave
Suite, Apt. #, etc. Suite 101

City & State
Fort Myers, FL
Zip 33912 Country

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Fort Myers, FL
Zip 33912 Country

01092008 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-0808268

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WANDERON, THOMAS
868 106TH AVENUE NORTH
NAPLES, FL 34108

7. Name and Address of New Registered Agent

Name William Ennen
Street Address (P.O. Box Number is Not Acceptable)
14311 Metropolis Ave
Suite 101
City Fort Myers FL Zip Code 33912

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 William C Ennen

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-08

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME ENNEN, WILLIAM C
STREET ADDRESS 3914 W RIVERSIDE DR
CITY-ST-ZIP FORT MYERS, FL 33901 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
14311 Metropolis Ave
Suite 101
Fort Myers, FL 33912

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: William C Ennen

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

1-12-08

Date

239-454-9157

Daytime Phone #