## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Jan 09, 2008 08:00 A Secretary of State DOCUMENT # L04000016871 1. Entity Name TIKI BAR PROPERTIES, LLC Principal Place of Business Mailing Address 18151 MURDOCK CIR 18151 MURDOCK CIR PORT CHARLOTTE, FL 33948 PORT CHARLOTTE, FL 33948 01062008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0837307 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CUGINI, DANIEL M DO NOT WRITE 18151 MURDOCK CIR PORT CHARLOTTE, FL 33948 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 remetating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME CUGINI, DANIEL M 18151 MURDOCK CIR STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33948 MGRM TITLE MANNING, GIUSEPPE NAME 18101 MURDOCK CIR STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE, FL 33948 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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.

TITLE NAME STREET ADDRESS CITY-ST-ZIP