

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT.**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000019934

1. Entity Name
9 DEGREES NORTH, LLC



Principal Place of Business
506 EAGLE CIRCLE
CASSELBERRY, FL 32707

Mailing Address
506 EAGLE CIRCLE
CASSELBERRY, FL 32707



04222008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1700265

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BERRY, DALY I
506 EAGLE CIRCLE
CASSELBERRY, FL 32707

**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

000000943048
05/29/08-80045-005 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
DALY, THOMAS E
506 EAGLE CIRCLE
CASSELBERRY, FL 32707

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
DALY, BERRY I
506 EAGLE CIRCLE
CASSELBERRY, FL 32707

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 606, Florida Statutes.

SIGNATURE:

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

4.29.2008 407-740-7373

Date

Daytime Phone #