## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L04000022539**

1. Entity Name

**GUEST QUARTERS, L.L.C.** 



FILED May 27, 2008 08:00 AN Secretary of State

Principal Place of Business

7331 VILLA D ESTE DR. SARASOTA, FL 34238 Mailing Address

7331 VILLA D ESTE DR. SARASOTA, FL 34238



05082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-0901142		Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

MYERS, TROY H JR. 2033 MAIN STREET SUITE 600 SARASOTA, FL 34237

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char ions of registered agent.	anging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acce
SIGNATURE.	Signature, typed or printed name of registered agent and title if explicable	(NOTE: Registered Agent signisture required when reinstating)  DATE
Due	E NOW!!! FEE IS \$538.75 by September 12, 2008	U00000952373 06/04/08-80078-002 538.75
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME	MGR LURZ, JULIA	
STREET ADDRESS	7331 VILLA D'ESTE DR.	
CITY-ST-ZIP	SARASOTA, FL 34238	
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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:

CITY-ST-ZIP

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

5-15-08

941-350-1904

Daytime Phone #