

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000029279**

1. Entity Name  
**INFINITY REALTY & DEVELOPMENT, LLC**



Principal Place of Business  
**275 WEST MAIN STREET  
LAKE BUTLER, FL 32054**

Mailing Address  
**275 WEST MAIN STREET  
LAKE BUTLER, FL 32054**



04252008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

**20-1090413**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**FORTNER, CHRISTOPHER R  
275 W. MAIN STREET  
LAKE BUTLER, FL 32054**

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
FORTNER, CHRISTOPHER R  
275 WEST MAIN STREET  
LAKE BUTLER, FL 32054**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S  
CARLTON, PAUL  
275 WEST MAIN STREET  
LAKE BUTLER, FL 32054**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**T  
RUSSELL, TIMOTHY L  
275 WEST MAIN STREET  
LAKE BUTLER, FL 32054**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**MGR  
FORTNER, ELIZABETH A  
RT 5 BOX 5710  
LAKE BUTLER, FL 32054**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

000000292798  
05/21/08-80083-005 138.75

**DO NOT WRITE  
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:**

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

Date

Daytime Phone #

*C. R. Fortner* **CHRISTOPHER R FORTNER**

**4-24-08**

**386-496-3634 ext 109**