2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008 08:00 A
Secretary of State

DOCUMENT # L04000030452

1. Entity Name
PULLUM COMMERCE PARK, L.L.C.

Principal Place of Business	Mailing Address
8494 NAVARRE PKWY NAVARRE, FL 32566	8494 NAVARRE PKWY NAVARRE, FL 32566

DO NOT WRITE IN THIS SPACE

04032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
55-0864080

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. **Name and Address of Current Registered Agent**

PULLUM, WILLIAM A
8494 NAVARRE PKWY
NAVARRE, FL 32566

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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)

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04/22/08-60028-017 138.75

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PULLUM, WILLIAM A
STREET ADDRESS	8494 NAVARRE PKWY
CITY-ST-ZIP	NAVARRE, FL 32566
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: William A. Pullum, Managing Member 4/7/08 850-939-2363
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #