2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000032323

1. Entity Name JOHN SODERLIND, LLC



Principal Place of Business

Mailing Address

4142 CHERI DR.

JENSEN BEACH, FL 34957

4142 CHERI DR. JENSEN BEACH, FL 34957

FILED Aug 19, 2008 8:00 am Secretary of State

08-19-2008 90027 022 ***139.00

50009574



07162008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
NOT APPLICABLE	 	Not Applicable
5. Certificate of Status Desired	\$5.0	Additional

Fee Required

6. Name and Address of Current Registered Agent

SODERLIND, JOHN 4142 CHERI DR. JENSEN BEACH, FL 34957

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			<u> </u>
	ions of registered agent	J.S.	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept
	#gnature, typed or printed name of registered agent and	title if applicable. (NOTE: Registere	d Agent signature required when reinstating) DATE
FILE Due	E NOWIII FEE IS \$138.75 by September 12, 2008	In accordance with s. 607.1 liability company did not re	193(2)(b), F.S., the limited ceive the prior notice.
9.	MANAGING MEMBERS	S/MANAGERS	
TITLE NAME STREET ADORESS CITY-ST-ZIP	MGR SODERLIND, JOHN 4142 CHERI DR. JENSEN BEACH, FL 34957	, ,,,,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS			
CITY-ST-ZIP			
indicated	on this report is true and accurate and the	hat my signature shall have the sa	remptions contained in Chapter 119, Florida Statutes. I further certify that the information me legal effect as if made under oath; that I am a managing member or manager of the as required by Chapter 608, Efficient Statutes.

ND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE