2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000048595

1. Entity Name
DOUBLE R LANE MANAGEMENT, LLC

Principal Place of Business	Mailing Address
5840 RED BUG LAKE ROAD, SUITE 375 WINTER SPRINGS, FL 32708	5840 RED BUG LAKE ROAD, SUITE 375 WINTER SPRINGS, FL 32708

DO NOT WRITE IN THIS SPACE

50006907

04302008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number		Applied For
NOT APPLICABLE		Not Applicable

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

6. Name and Address of Current Registered Agent

KATTELMANN, JAMES G
215 N. EOLA DRIVE
ORLANDO, FL 32801

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	MGR
NAME	BARRETT, ERICH
STREET ADDRESS	5840 RED BUG LAKE RD, STE 375
CITY-ST-ZIP	WINTER SPRINGS, FL 32708

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
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CITY-ST-ZIP	

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: _____   4-28-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #