## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000051582

1. Entity Name

JENSEN BEACH @ ROUTE 1 #4, LLC



**FILED** Apr 16, 2008 08:00 A Secretary of State

Principal Place of Business

4007-F NORBECK ROAD ROCKVILLE, MD 20853 Mailing Address

4007-F NORBECK ROAD ROCKVILLE, MD 20853



## DO NOT WRITE IN THIS SPACE

03282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 51-0505907 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

THURLOW, THOMAS H JR.

17 MARTIN LUTHER KING JR. BLVD

## DO NOT WRITE

SUITE 200 STUART, FL FL		IN THIS SPACE	
the obligation of the signature.	tions of registered agent.	I ging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and a	ccept
FILE After May	Syneture. Syned or printed name of registered agent and title if applicable.  NOWILL FEE IS \$138.75  y 1, 2008 Fee will be \$538.75	(NOTE. Registered Agent a greature required when reinstating) DATE	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR DISALVATORE, JOHN A JR. 4700-F NORBECK ROAD ROCKVILLE, MD 20853	——————————————————————————————————————	75
TITLE NAME STREET ADDRESS GITY-ST-ZIP	·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this tiling does not qualify by 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:

NAME STREET ADDRESS CITY-ST-ZIP

PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #