#### **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

#### DOCUMENT # L04000056535

AXIOM INVESTMENTS/BRADFORD ESTATES, L.L.C.



Principal Place of Business

Mailing Address

101-A BUSINESS CENTRE DRIVE DESTIN, FL 32550

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# **FILED** Mar 13, 2008 8:00 am Secretary of State

03-13-2008 90269 030 \*\*\*138.75

CCFFTOOD



02272008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1824995

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

Fee Required

#### LEUCHTMAN, GARY B 501 COMMENDENCIA STREET

### DO NOT WRITE PENSACOLA, FL 32502 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

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

# After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AXIOM CAPITAL GROUP, LLC 101-A BUSINESS CENTRE DRIVE DESTIN, FL 32550
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

## DO NOT WRIT 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 expecte this report as required by Chapter 608, Florida Statutes.

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

Daytime Phone #