


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000058893 1. Entity Name NORTH LABELLE RENTALS, LLC	
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Principal Place of Business 90 YEOMANS AVENUE LABELLE, FL 33935 US	Mailing Address P.O. BOX 490 LABELLE, FL 33975 US
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DO NOT WRITE IN THIS SPACE

01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1474868	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOY, JOHN B JR
90 YEOMANS AVENUE
LABELLE, FL 33975

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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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM DAVENPORT INVESTORS GROUP, INC. 90 YEOMANS AVENUE LABELLE, FL 33935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CENTRAL MOBILE HOMES, INC. 835 S. MAIN STREET LABELLE, FL 33935
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PEERY, JAMES P P.O. BOX 1103 LABELLE, FL 33975
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PERRY, CATHY E P.O. BOX 1103 LABELLE, FL 33975
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/11/08-80048-008 138.75

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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: John B Boy Jr John B Boy Jr 1/7/08 863-675-3777

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