

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Feb 19, 2008 08:00 A
Secretary of State**

DOCUMENT # L04000060715

1. Entity Name
CLA PROPERTIES, L.L.C.



Principal Place of Business

6111 N. DAVIS HIGHWAY
PENSACOLA, FL 32504

Mailing Address

6111 N. DAVIS HIGHWAY
PENSACOLA, FL 32504



02072008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1425981

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

NEWSOME, STEPHEN B
6111 N. DAVIS HIGHWAY
PENSACOLA, FL 32504

**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**

U00000833371
02/28/08-80009-021 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE P
NAME NEWSOME, STEPHEN B
STREET ADDRESS 940 BACYRUS LN
CITY-ST-ZIP CANTONMENT, FL 32533

TITLE MGRM
NAME NEWSOME, JENNIFER C
STREET ADDRESS 940 BACYRUS LANE
CITY-ST-ZIP CANTONMENT, FL 32533

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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: _____

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

Date

Daytime Phone #

2-13-08