2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000065425

1. Entity Name

BOUKALIS DEVELOPMENT OF ST. PETERSBURG, L.L.C.



FILED Mar 03, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

3100 22ND AVENUE NORTH ST. PETERSBURG, FL 33713 3100 22ND AVENUE NORTH ST. PETERSBURG, FL 33713



02062008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	Applied For	_
20-1573314	Not Applicable	e
5. Certificate of Status Desired	\$5.00 Additional	_

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VASILIOS, BOURAUS 3100 22ND AVE NORTH SAINT PETERSBURG, FL 33713

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan ions of registered agent.	ging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		U00000845189 03/13/08-80029-012 138.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	BOUKALIS, VASILIOS		
STREET ADDRESS	3100 22ND AVENUE NORTH		
CITY-ST-ZIP	ST. PETERSBURG, FL 33713		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS		l no	NOT WRITE
CITY-ST-ZIP			MOT WINTE
TITLE		l in '	THIS SPACE
NAME		"	
STREET ADDRESS			
CITY-ST-ZIP			

11. I nereby 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:

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

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

2-28-08

Date

Daytime Phone #