

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000069422

1. Entity Name
RAVEN INVESTMENT PROPERTIES, LLC



Principal Place of Business
**1815 SOUTH RIDGEWOOD AVE
SOUTH DAYTONA, FL 32119**

Mailing Address
**1815 SOUTH RIDGEWOOD AVE
SOUTH DAYTONA, FL 32119**

FILED
Jul 07, 2008 08:00 AM
Secretary of State



07042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1656004

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BUTTERS, DAVID
821 GEORGE HECKER DRIVE
SOUTH DAYTONA, FL 32119**

**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 restate.)

7-1-08

DATE

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U00000953591

07/07/08-80004-022 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
BUTTERS, DAVID
821 GEORGE HECKER DR
SOUTH DAYTONA, FL 32119**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
BUTTERS, CLAUDIA
821 GEORGE HECKER DR
SOUTH DAYTONA, FL 32119**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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)

7-1-08

Date

386-290-1962

Daytime Phone #