2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000082752

1. Entity Name
POLE CADDY, LLC



FILED Mar 21, 2008 8:00 am Secretary of State

03-21-2008 90117 045 ***138.75

Principal Place of Business

iness Mailing Address

969 BUCYRUS LANE

CANTONMENT, FL 32533

P.O. BOX 1004

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GONZALEZ, FL 32560

US



 \Box

03182008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1897016 Applied For Not Applica

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ELLIOTT, MICHAEL C 969 BUCYRUS LANE CANTONMENT, FL 32533

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			the state of the s	
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE	
SIGNATURE	`		·	
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the obliga	ations of registered agent.			
	e named entity submits this statement for the purpose of char	nging its registered office or registered agent, or both, in the	State of Horida. I am familiar with, and	acc.

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS		
TITLE NAME Street adoress City-St-Zip	MGR ELLIOTT, MICHAEL C 969 BUCYRUS LANE CANTONMENT, FL 32533	
TITLE Name Street address City-St-Zip.	MGR CARRELL, JOHN 1441 COUNTRY HILLS DR CANTONMENT, FL 32533	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STEBER, KENNETH R 4615 AVENIDA MARINA PENSACOLA, FL 32504	
TITLE Name Street address City-St-Zip		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY+ST-ZIP		

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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 informatic 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.