

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 12, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000082894

1. Entity Name
SARASOTA INVESTMENTS LLC



Principal Place of Business
6520 BAYSHORE BLVD.
TAMPA, FL 33611

Mailing Address
6520 BAYSHORE BLVD.
TAMPA, FL 33611



01072008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
42-1650451

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALLEN, STEVE
6520 BAYSHORE BLVD.
TAMPA, FL 33611

**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 the 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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ALLEN, STEVE
STREET ADDRESS	6520 BAYSHORE BLVD.
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	MGRM
NAME	ALLEN, MATT
STREET ADDRESS	4527 LITTLE JOHN TRAIL
CITY-ST-ZIP	SARASOTA, FL 34232
TITLE	MGRM
NAME	WILLIAMS, MARK
STREET ADDRESS	887 SHALLOW RUN ROAD
CITY-ST-ZIP	SARASOTA, FL 34240
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000856303
03/28/08-80007-019 138.75

**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 #

1/7/08 (813) 766-6528