## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Apr 24, 2008 8:00 am Secretary of State **DOCUMENT # L04000083657** 04-24-2008 90011 048 \*\*\*143.75 1. Entity Name JERRY SHORT FENCE, L.L.C. Principal Place of Business Mailing Address 00061161 1207 VALLEY RD 1207 VALLEY RD FRUITLAND PARK, FL 34731 FRUITLAND PARK, FL 34731 3. Mailing Address 1107 LINMAR AVE 2. Principal Place of Business - No P.O. Box # 107 LINMAR AUE Suite, Apt. #, etc. 04222008 Chg-LLC CR2E083 (12/06) 4. FEI Number Applied For 34-2027756 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHORT, JERRY Street Address (P.O. Box Number is Not Acceptable) 1207 VALLEY RD FRUITLAND PARK, FL 34731 CITYFRUITURND 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. 1 am familiar registered age SIGNATURE Make check payable to FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 10. 9. MBR MGR ☐ Delete MLE P1 Change ☐ Addition TITLE SHORT, JERR SHORT, JERRY NAME NAME 1107 LINMAR AVE 1207 VALLEY RD STREET ADDRESS STREET ADDRESS FRUITLAND PARK, FL 34731 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITT F ☐ Detete TITLE ☐ Change - Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78 ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete MLE Change Addition IIILE NAME MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

FILED