


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 07, 2007 8:00 am
Secretary of State

02-07-2007 90114 017 ****55.00

DOCUMENT # L05000002265			
1. Entity Name ARDEE PROPERTIES, LLC			
Principal Place of Business 1515 N. FEDERAL HIGHWAY, SUITE 300 BOCA RATON FL 33432		Mailing Address 1648 TAYLOR ROAD, #301 PORT ORANGE FL 32128	
2. Principal Place of Business - No P.O. Box # 1648 TAYLOR ROAD		3. Mailing Address	
Suite, Apt. #, etc. # 301		Suite, Apt. #, etc.	
City & State PORT ORANGE FL		City & State	
Zip 32128	Country FLORIDA	Zip	Country
6. Name and Address of Current Registered Agent PEASLEY, RONALD M 1648 TAYLOR ROAD, #301 PORT ORANGE FL 32128		4. FEI Number 57-1217428	
		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
7. Name and Address of New Registered Agent			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City		FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating)			
DATE _____			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PEASLEY, RONALD 1515 N. FEDERAL HIGHWAY, SUITE 300 BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PEASLEY, RONALD M 1478 NAPPA DRIVE PORT ORANGE FL 32128 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Ronald M. Peasley		Date: 1-29-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Daytime Phone #: 361-445-0533 386-767-1285	