2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000002322

1. Entity Name
SERVAIS, SWEENY AND JOHNSON PROPERTY CO., LLC

Principal Place of Business	Mailing Address
329 CALZADA DE BOUGAINVILLE MARATHON, FL 33050	329 CALZADA DE BOUGAINVILLE MARATHON, FL 33050

01292008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2238636
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

WOLFE, JOHN J
2955 OVERSEAS HIGHWAY
MARATHON, FL 33050

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SERVAIS, RICHARD B
STREET ADDRESS	329 CALZADA DE BOUGAINVILLE
CITY-ST-ZIP	MARATHON, FL 33050
TITLE	MGRM
NAME	SWEENY, BRIAN
STREET ADDRESS	329 CALZADA DE BOUGAINVILLE
CITY-ST-ZIP	MARATHON, FL 33050
TITLE	MGRM
NAME	JOHNSON, MARION K
STREET ADDRESS	329 CALZADA DE BOUGAINVILLE
CITY-ST-ZIP	MARATHON, FL 33050
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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02/12/08-80062-013 138.75

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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 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: _____ 2/1/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #