2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000007752

1. Entity Name

NORTH TOWN ASSOCIATES LLC



FILED Mar 23, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

9101 W COLLEGE POINTE DR Suite 1 Fort Myers, FL 33919 9101 W COLLEGE POINTE DR SUITE 1 FORT MYERS, FL 33919



DO NOT WRITE IN THIS SPACE

02272007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2213539

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KINSEY, JAMES E JR 1230 WESTFIELD DR FORT MYERS, FL 33919

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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

Signature, typed or printed name of registered agent and title if applicable

AMANACINIC MEMBERCINAMIACER

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KINSEY, JAMES E JR 9101 W COLLEGE POINTE DR STE 1 FORT MYERS, FL 33919	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KINSEY, JOHN T PO BOX 811987 BOCA RATON, FL 33481	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
41. I hereby certify that the information supplied with this filing does not qualify for the exe		

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF BIONONG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

JAMES EXINSEY LA 3/19/07 239-939-1367

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