

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000008465

Entity Name: BOXR, LLC

FILED  
Mar 30, 2007  
Secretary of State

**Current Principal Place of Business:**

1040 AVERLY ST.  
FT. MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1040 AVERLY ST.  
FT. MYERS, FL 33919

**New Mailing Address:**

FEI Number: 20-2341684

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROHALEY, YVONNE A  
1040 AVERLY ST.  
FT. MYERS, FL 33919 US

**Name and Address of New Registered Agent:**

BURSON, ROBERT A  
900 E OCEAN BLVD  
SUITE C-120  
STUART, FL 34994 US

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.

SIGNATURE: ROBERT A BURSON

03/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ROHALEY, YVONNE A  
Address: 1040 AVERLY ST.  
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM ( ) Delete  
Name: ROHALEY, DENIS P  
Address: 1040 AVERLY ST.  
City-St-Zip: FT. MYERS, FL 33919

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: YVONNE A ROHALEY

MGRM

03/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date