2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000011332

1. Entity Name

99TH AVENUE TOWNHOMES, LLC



FILED Apr 25, 2007 08:00 Al Secretary of State

Principal Place of Business

2506 S. MACDILL AVENUE TAMPA, FL 33629

Mailing Address

2506 S. MACDILL AVENUE TAMPA, FL 33629



01242007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number	
	20-4523446	

Applied For ...
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MAYTS, ANDREW J JR 201 NORTH ARMEDIA AVE TAMPA, FL 33601

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The above the obligat	e named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE		(NOTE: Registered Agent aignature required when reinstaling)	DATE
FI	lling Fee Is \$50.00 ue by May 1, 2007		,
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM LANDERS, JAMES F 2506 SOUTH MACDILL AVE SUITE A TAMPA, FL 33629		U00000725497 05/08/07-80041-010 50:00
STREET ADORESS CITY-ST-ZIP			
TITLE NAME STREET ADORESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS		in.	THIS SPACE

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:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

4/20107

813-902-0578

Daytime Phone #