## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L05000011332

1. Entity Name
99TH AVENUE TOWNHOMES, LLC



FILED Jan 31, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2506 S. MACDILL AVENUE TAMPA, FL 33629

2506 S. MACDILL AVENUE TAMPA, FL 33629



DO NOT WRITE IN THIS SPACE

01082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4523446 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

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

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>			
SIGNATURE			
	Signature, typed or printed name of registered agent and title if applicable	(NOTE, Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS		,
TITLE	MGRM		Communication of the second second
NAME	LANDERS, JAMES F		
STREET ADDRESS	2506 SOUTH MACDILL AVE SUITE A	•	
CITY-ST-ZIP	TAMPA, FL 33629	6.00	
TITLE			
NAME		1	U00000808434 02/07/08-80048-020 138.75
STREET ADDRESS			02/07/08-80048-020 138.75
CITY-ST-ZIP			
TITLE		i	
NAME STREET ADDRESS			_
CITY-SI-ZIP		I DC	NOT WRITE
			*
TITLE NAME		Į IN	THIS SPACE
STREET ADDRESS		•	
CITY-ST-ZIP		, ,	•
TITLE	··· · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			CS Section 1
TITLE		,	•
NAME			
STREET ADDRESS		<b>j</b> '	
CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes 1 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE