

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000013876 1. Entity Name RONNIE EARL BROXSON, JR. "LLC"	
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Principal Place of Business 6915 NELSON STREET NAVARRE, FL 32566	Mailing Address 6915 NELSON STREET NAVARRE, FL 32566
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DO NOT WRITE IN THIS SPACE



02042008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2326671	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent BROXSON, RONNIE EARL JR 6915 NELSON STREET NAVARRE, FL 32566
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**DO NOT WRITE
IN THIS SPACE**

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.

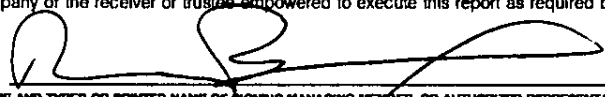
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$338.75	U00000029867 02/26/08-80060-008 138.75
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B. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BROXSON, RONNIE EARL JR. 6915 NELSON STREET NAVARRE, FL 32566
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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: 	2-8-08	850-939-7091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date	Daytime Phone #