

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000016822

1. Entity Name
DEPOT INDUSTRIAL CENTER LLC



FILED

Feb 14, 2008 08:00 AM
Secretary of State

Principal Place of Business

3701 FAU BOULEVARD STE 205
BOCA RATON, FL 33432

Mailing Address

3701 FAU BOULEVARD STE 205
BOCA RATON, FL 33432



DO NOT WRITE IN THIS SPACE

01222008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-2571334	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

HEAD, THOMAS A
3701 FAU BOULEVARD STE 205
BOCA RATON, FL 33432

**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 _____

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	MGR
NAME	HEAD, THOMAS S
STREET ADDRESS	3701 FAU BLVD., STE.205
CITY-ST-ZIP	BOCA RATON, FL 33431

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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000000827707
02/22/08-80001-007 138.75

**DO NOT WRITE
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:

1/24/08 56-347-6915

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

Date

Daytime Phone #