## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000021331

1. Entity Name 400 PARTNERS, LLC





Principal Place of Business

3109 59TH AVENUE DRIVE EAST BRADENTON, FL 34203

Mailing Address

3109 59TH AVENUE DRIVE EAST BRADENTON, FL 34203

FILED Apr 14, 2008 08:00 All Secretary of State



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03102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2442346

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOWMAN, DAVID G JR 2750 RINGLING BLVD., SUITE 3 SARASOTA, FL 34237 DO NOT WRITE
IN THIS SPACE

8.	The above	named ent	ity submits	s this stat	ement fo	r the purpose	of changi	ng its registered	office or regis	stered a	agent, or l	ooth, in th	ne State o	if Florida.	am far	nihar v	vith, and	acce	pt
	the obligat	tions of regi:	stered age	ent.								. ,	1		•		_		
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SIC	SNATURE.					<u> </u>					** :		:		<u> </u>		•	<u> </u>	•
	Signature, typed or printed name of registered agent and title if applicable					a	(NOTE Registered Agent signature required when reinstaturg)						D	DATE					

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TITON, RUSSELL P.O. BOX 1848 BRADENTON, FL 34206 MGRM LEUCHTER, JOSHUA M 3109 SATIN AVE. DR. E BRADENTON, FL 34203								
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
11. Thereby certify that the information supplied with this filing does not qualify for the ex-									

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 advantage 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:** 

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING MANAGING

MBER, OR AUTHORIZED REPRESENTATIVE

4/10/08

941-751-3333

Daytime Phon