2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000038295

1. Entity Name

THE MARTHA REBECCA LEWIS FAMILY LLC



900 E OCEAN BLVD STE 210B STUART, FL 34994

Principal Place of Business

Mailing Address

900 E OCEAN BLVD STE 210B STUART, FL 34994 FILED Apr 28, 2008 08:00 AN Secretary of State



04082008 No Chg-LLC

-1-08

CR2E083 (12/07)

4.	FEI Number			Applied For
	NOT APPLICABLE			Not Applicable
5.	Certificate of Status Desired	\$5.00 Additional Fee Required		

6. Name and Address of Current Registered Agent

HARVIN, WES II 900 E OCEAN BLVD STE 210B STUART, FL 34994

the obligations of registered agent.

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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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEWIS, MARTHA R 900 E OCEAN BLVD STE 210B STUART, FL 34994		U00000927737 05/21/08-80001-008 138.75			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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.						

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