


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State

DOCUMENT # L05000038852 1. Entity Name ALLEN & SCOTT PROPERTIES, LLC	
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Principal Place of Business 901 DRAKESWOOD CT. SARASOTA, FL 34232	Mailing Address 901 DRAKESWOOD CT. SARASOTA, FL 34232
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DO NOT WRITE IN THIS SPACE



04172008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 86-1140284	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

PITTMAN, SCOTT R
 901 DRAKESWOOD CT.
 SARASOTA, FL 34232

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

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

000000910999
 05/07/08-80020-004, 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PITTMAN, SCOTT R 901 DRAKESWOOD CT SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PITTMAN, JUDITH K 901 DRAKESWOOD CT SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WATERS, J A 7040 DEL LAGO SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WATERS, BRENDA S 7040 DEL LAGO SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: J.A. Waters J.A. WATERS 4/17/08 941-925-1030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #