


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2008 08:00 A
Secretary of State

DOCUMENT # L05000042064 1. Entity Name GATOR NATION, LLC	
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Principal Place of Business P.O. BOX 140062 GAINESVILLE, FL 32614	Mailing Address P.O. BOX 140062 GAINESVILLE, FL 32614
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DO NOT WRITE IN THIS SPACE



03092008 No Chg-LLC

CR2E083 (12/07)

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

6. Name and Address of Current Registered Agent

BROWN, DARLENE J
14918 SW 162ND ST.
ARCHER, FL 32618

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 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	MGR BROWN, DARLENE J P.O. BOX 140062 GAINESVILLE, FL 32614
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROWN, CHARLES O 11753 SW 158TH STREET ARCHER, FL 32618
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03/27/08-80018-005 143.75

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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: *Darlene Brown* **Darlene Brown** **3.10.08** **352-495-8142**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #