

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000048193

1. Entity Name
STARKEY RANCH INVESTMENT COMPANY, LLC



Principal Place of Business
**12959 STATE ROAD 54
ODESSA, FL 33556**

Mailing Address
**12959 STATE ROAD 54
ODESSA, FL 33556**



01142008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2859949

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MILLER, RANDELL M
315 S. HYDE PARK AVENUE
TAMPA, FL 33616**

**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	P
NAME	STARKEY, JAY B JR
STREET ADDRESS	12959 STATE ROAD 54
CITY-STATE-ZIP	ODESSA, FL 33556
TITLE	VD
NAME	STARKEY, TREY
STREET ADDRESS	12959 STATE ROAD 54
CITY-STATE-ZIP	ODESSA, FL 33556
TITLE	VP
NAME	STARKEY, FRANK
STREET ADDRESS	12959 STATE ROAD 54
CITY-STATE-ZIP	ODESSA, FL 33556
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

UD00000789403
01/22/08-80023-017 138.75

**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: _____

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

Date

Daytime Phone #