2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2008
Secretary of State

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Entity Name: SPAR PROPERTIES, LLC

Current Principal Place of Business:

2217 ROSLYN LANE
LAKELAND, FL 33813

New Principal Place of Business:

1271 STRADA MILAN LN
2
NAPLES, FL 34105

Current Mailing Address:

2217 ROSLYN LANE
LAKELAND, FL 33813

New Mailing Address:

1271 STRADA MILAN LN
2
NAPLES, FL 34105

FEI Number: 20-3032302 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHELBY, MEDINA & STARGEL, LLP
902 SOUTH FLORIDA AVE., SUITE 101
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: SPOTO, JAMES R JR.
Address: 2217 ROSLYN LANE
City-St-Zip: LAKELAND, FL 33813

Title: MGR ( ) Delete
Name: SPOTO, LORENA
Address: 2217 ROSLYN LANE
City-St-Zip: LAKELAND, FL 33813

Title: MGR ( ) Delete
Name: ARNOLD, RENEE
Address: 5115 NORTH SOCRUM LOOP ROAD
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAMES R. SPOTO JR. MR 02/12/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date