

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000066460

1. Entity Name
CHIMAERA LLC



Principal Place of Business
861 S. 10TH STREET
JACKSONVILLE BEACH, FL 32250

Mailing Address
861 S. 10TH STREET
JACKSONVILLE BEACH, FL 32250

FILED
Mar 09, 2007 08:00 AM
Secretary of State



03052007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3212762	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

LEAGUE & JESPERSON, P.A.
3955 RIVERSIDE AVENUE
SUITE 100
JACKSONVILLE, FL 32205

**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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FOGG, MICHAEL 861 S. 10TH STREET JACKSONVILLE BEACH, FL 32250
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03/20/07-80010-020 50.00

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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 #

David M. Fogg 3/6/07 904-248-5214