

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 24, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000066553	
1. Entity Name 1070 COUNTY LINE ROAD, LLC	

Principal Place of Business 41 LAKE MORTON DRIVE LAKELAND, FL 33801	Mailing Address P.O. BOX 2420 LAKELAND, FL 33806
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DO NOT WRITE IN THIS SPACE



02272008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-3199880	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent RUTHVEN, JOE P 41 LAKE MORTON DRIVE LAKELAND, FL 33801	
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**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 THE RUTHVENS, INC. 41 LAKE MORTON DRIVE LAKELAND, FL 33801
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04/09/08-80013-002 138.75

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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: <u>JOE P. RUTHVEN, PRESIDENT THE RUTHVENS, INC</u>	863-686-3173
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #