

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000093474

1. Entity Name
BRESCOTT PROPERTIES LLC



Principal Place of Business
**11660 SPOONBILL LANE
FORT MYERS, FL 33913**

Mailing Address
**11660 SPOONBILL LANE
FORT MYERS, FL 33913**

DO NOT WRITE IN THIS SPACE



04282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-3513969

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GOOD, RONALD L
11660 SPOONBILL LANE
FORT MYERS, FL 33913**

**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**

000000936847
05/27/08-80025-015 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
GOOD, RONALD L
11660 SPOONBILL LANE
FORT MYERS, FL 33913**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
GOOD, LINDA W
11660 SPOONBILL LANE
FORT MYERS, FL 33913**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: *Ronald L. Good* **RONALD L. GOOD**

4/27/08 466-7577

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

Date

Daytime Phone #