

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100075

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: 100 TREELINE EAST, LLC

**Current Principal Place of Business:**

5245 BIG PINE WAY  
SUITE 102  
FT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

5245 BIG PINE WAY  
SUITE 102  
FT MYERS, FL 33907

**New Mailing Address:**

FEI Number: 20-3527895      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROGAN, ROKKI  
5245 BIG PINE WAY  
SUITE 102  
FT MYERS, FL 33907 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: MGRM ( ) Delete  
Name: ROGAN, ROKKI  
Address: 11117 HARBOUR ESTATE CIRCLE  
City-St-Zip: FT MYERS, FL 33908

Title: MGRM ( ) Delete  
Name: CAMACCI, MIHAEL A  
Address: 19720 PRINCE BENJAMIN DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: MGRM ( ) Delete  
Name: MOUNCE, JOHN  
Address: 15606 LIGHT BLUE CIRCLE  
City-St-Zip: FT MYERS, FL 33908

Title: MGRM ( ) Delete  
Name: BALLEW, DAVID  
Address: 24676 CANARY ISLAND COURT #102  
City-St-Zip: BONITA SPRINGS, FL 34134

**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:

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: ROKKI ROGAN

MGRM

04/27/2007

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