

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100075

Entity Name: 100 TREELINE EAST, LLC

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

5245 BIG PINE WAY
SUITE 102
FT MYERS, FL 33907

Current Mailing Address:

5245 BIG PINE WAY
SUITE 102
FT MYERS, FL 33907

New Principal Place of Business:

5245 BIG PINE WAY
SUITE 102
FT MYERS, FL 33907 US

New Mailing Address:

5245 BIG PINE WAY
SUITE 102
FT MYERS, FL 33907 US

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: MGRM (X) Change () Addition
Name: ROGAN, ROKKI
Address: 5245 BIG PINE WAY SUITE #102
City-St-Zip: FT MYERS, FL 33907 US

Title: MGRM (X) Change () Addition
Name: CAMACCI, MICHAEL A
Address: 19720 PRINCE BENJAMIN DRIVE
City-St-Zip: LUTZ, FL 33549 US

Title: MGRM (X) Change () Addition
Name: MOUNCE, JOHN
Address: 5245 BIG PINE WAY SUITE #102
City-St-Zip: FT MYERS, FL 33907

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

04/29/2008

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