

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000101002

1. Entity Name
TRACKS & TRAILS, LLC



Principal Place of Business
**87 NW 39TH STREET CT
BRADENTON, FL 34205**

Mailing Address
**87 NW 39TH STREET CT
BRADENTON, FL 34205**



03062008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**MILLER, JANIS L
87 NW 39TH STREET CT
BRADENTON, FL 34205**

**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

000000910897
05/07/08-80020-003.138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MILLER, JANIS L
STREET ADDRESS	87 NW 39TH STREET CT
CITY-ST-ZIP	BRADENTON, FL 34205

TITLE	MGRM
NAME	MILLER, JOHN L
STREET ADDRESS	87 NW 39TH STREET CT
CITY-ST-ZIP	BRADENTON, FL 34205

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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 #

JANIS L. MILLER 4-18-08 941-748-7318