2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000106474

1. Entity Name 3700 ULMERTON ROAD PLAZA, LLC



Principal Place of Business

2152 14TH CIR NORTH SAINT PETERSBURG, FL 33713 US Mailing Address

2152 14TH CIR NORTH

SAINT PETERSBURG, FL 33713

FILED Mar 06, 2008 8:00 am Secretary of State 03-06-2008 90246 044 ***138.75

-4416001



01212008 No Chg-LLC

CR2E083 (12/07)

FEI Number		Applied For
20-3715927		Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6.	Name	and	Address	οf	Current	Registered	Agent

EAST, CLARK D 5509 W GRAY STREET SUITE 201 TAMPA, FL 33609

SIGNATURE:

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, tylerdox printed name of registered agent and title if applicable.	(NOTE: Registere	d Agent signature required when reinstating)	DATE				
File NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75								
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR EAST, CLARK D 5509 W GRAY STREET SUITE 201 TAMPA, FL 33609							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Clark H. Schover III 2152 jul Circle N St. Petersburg fl 33713							
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS	SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-						
indicated	certify that the information supplied with this filling does not q on this report is true and accurate and that my signature sh billity company or the receiver or trustee empowered to exec	hall have the sar	ne legal effect as if made under oath, that I are	atutes. I further certify that the information in a managing member or manager of the				