


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000106910 1. Entity Name SPOCK ENTERPRISE, LLC	
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Principal Place of Business 600 RIPPLING CREEK COVE NICEVILLE, FL 32578 US	Mailing Address 600 RIPPLING CREEK COVE NICEVILLE, FL 32578 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SPOCK, VIRGINIA C 600 RIPPLING CREEK COVE NICEVILLE, FL 32578
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008	In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SPOCK, VIRGINIA C 600 RIPPLING CREEK COVE NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SPOCK, RONALD L 600 RIPPLING CREEK COVE NICEVILLE, FL 32578
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE
REINSTATEMENT

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.
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SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date Oct 7, 2008	Daytime Phone # (850) 217-7589
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FILED
08 OCT 21 PM 12:36
**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



09262008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3794331	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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10/20/08--01070--013 **138.75