2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT #L05000108303

1. Entity Name

WARRING & WARRING 2, LLC



FILED Apr 17, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

7106 NW 18TH AVENUE GAINESVILLE, FL 32605

7106 NW 18TH AVENUE GAINESVILLE, FL 32605



04082008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number		Applied For
	11-3771725		Not Applicable
5.	Certificate of Status Desired	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

	6, MARK 18TH AVENUE ILLE, FL 32605		DO NOT WRITE IN THIS SPACE		
	named entity submits this statement for the purpose of changi ions of registered agent.	ng its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept		
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			000000902370 04/30/08-80003-025 138.75		
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WARRING, W.D. 7302 NW 18TH AVENUE GAINESVILLE, FL 32605				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WARRING, MARK 7106 NW 18TH AVENUE GAINESVILLE, FL 32605				

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4	1. I hereby pertify that the information symplicid with this filing does not qualify for the o	xemptions contained in Chapter 119, Florida Statutes. I further certify that the information
•	indicated on this round in true and appured and that my close true shell have the ne	me 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, Fiorida Statutes

SIGNATURE:

TITLE NAME STREET ADDRESS

NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
CITY- ST- ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4.1508

352-333-840C

Daytime Phone #