

2009

LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2009 JUN 10 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04302008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
84-1714347

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOWDEN, ROBERT K
307 CONN WAY
VERO BEACH, FL 32963DO 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 re-registering

DATE

FILE NOW! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

B. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	BOWDEN, ROBERT K
STREET ADDRESS	307 CONN WAY
CITY-ST-ZIP	VERO BEACH, FL 32963

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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06/10/09--01018--035 **138.75DO NOT WRITE
IN THIS SPACE

OK 6-11-09

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 RECORDING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/30/08 7722311267

Date

Daytime Phone #

Robert K. Bowden

4/31/09 7722311267