

3018

CITY-ST-ZIP

## 2008 LIMITED LIABILITY COMPANY

## Mar 27, 2008 8:00 am **ANNUAL REPORT** Secretary of State **DOCUMENT # L05000119812** 03-27-2008 90086 048 \*\*\*138.75 1. Entity Name PHOÉNIX LAND SURVEYING & ENGINEERING, L.L.C. Mailing Address 3014 N. U.S. HIGHWAY 301, SUITE 400 Srincipal Place of Business **EDATI** 1000 3014 N. U.S. HIGHWAY 301, SUITE 400 TAMPA, FL 3361#9 TAMPA, FL 3361**8 9** 02202008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Numbe 20-3955553 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BOYETTE, WADE DO NOT WRITE 3044 N. U.S. HIGHWAY 301, SUITE 400 1000 TAMPA, FL 336189 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 ager CINDY RICHARDS 312010R FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE BOSS, DANIEL NAME 301 N. U.S. HIGHWAY 301, SUITE 400 1000 STREET ADDRESS TAMPA, FL 33618 9 City-St-Zie TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRIT CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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Daytime Phone #

11. I hereby certify that the information supplied with this filling 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.

:3--13-08 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Oate