

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000120303

1. Entity Name

ASLAN PORTICO INVESTMENTS, LLC



SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 JUN 19 AM 10:12

Principal Place of Business

1031 ZORN AVENUE, #1400  
LOUISVILLE, KY 40207

Mailing Address

1031 ZORN AVENUE, #1400  
LOUISVILLE, KY 40207



02062008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

20-3774183

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

Gary L. Wilkinson Esq.  
1301 Riverplace Blvd. Ste. 1818  
Jacksonville, FL 32207

**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 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**

U00000921080  
05/14/08-80069-013 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	EVANS, GREGORY G
STREET ADDRESS	1031 ZORN AVENUE, #1400
CITY-ST-ZIP	LOUISVILLE, KY 40207

TITLE	
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IN THIS SPACE**

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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 TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone

*Gary L. Wilkinson Esq.* Gregory G. Evans 3/6/08 (502) 253-3100