

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000122418**

1. Entity Name  
OMSS PARKING 2, LLC



Principal Place of Business  
1108 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

Mailing Address  
1108 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805



04042008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-3999014	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

**6. Name and Address of Current Registered Agent**

SULLIVAN, ROBERT L  
1108 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32805

**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 re-registering)

DATE \_\_\_\_\_

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SULLIVAN, ROBERT L 1108 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SULLIVAN, STEPHEN E 1108 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32805
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000000834328  
04/24/08-80023-019 138.75

**DO NOT WRITE  
IN THIS SPACE**

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 SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Stephen E.  
Sullivan

4/4/08

Date

407-422-7115

Daytime Phone #