

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 APR 23 AM 8:45

DOCUMENT # L06000010487

1. Entity Name  
TRANSJET PROPERTIES, LLC



Principal Place of Business

8156 FIDDLER'S CREEK PKWY  
NAPLES, FL 34114 US

Mailing Address

8156 FIDDLER'S CREEK PKWY  
NAPLES, FL 34114 US



01172008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-4238822

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WOODWARD, MARK  
3200 TAMIAMI TRAIL NORTH #200  
NAPLES, FL 34103

**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**

000126879270  
04/29/08--01035--004 \*\*138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	TRANSJET PROPERTIES, INC.
STREET ADDRESS	8156 FIDDLER'S CREEK PARK WAY
CITY-ST-ZIP	NAPLES, FL 34114

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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04/29/08--01035--005 \*\*138.75

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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

3/14/08

(239) 732-9400

Date

Daytime Phone #

Joseph Livio Parisi, Authorized Representative