

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000013766 1. Entity Name ACCA LLC	
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Principal Place of Business 8607 EL MIRASOL COURT FORT MYERS, FL 33967 2	Mailing Address 8607 EL MIRASOL COURT FORT MYERS, FL 33996-7 2
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DO NOT WRITE IN THIS SPACE



04222008No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent ACCARDI, LEONARD J 8607 EL MIRASOL COURT FORT MYERS, FL 33967

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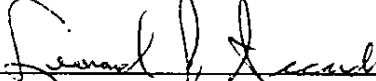
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ACCARDI, LEONARD J 8607 EL MIRASOL COURT FORT MYERS, FL 33967
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ACCARDI, BARBARA 8607 EL MIRASOL COURT FORT MYERS, FL 33967
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U00000921768
05/15/08-80019-015 138.75

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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 TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Leonard J. Accardi	Date 4/22/08	Daytime Phone # 239-433-4733
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