

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014105

FILED  
May 30, 2008  
Secretary of State

Entity Name: FOX PARTNERS ENTERPRISE, LLC

**Current Principal Place of Business:**

4019 WEST 1ST STREET  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

4019 WEST 1ST STREET  
SANFORD, FL 32771 US

**New Mailing Address:**

FEI Number: 20-4292602      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FOX, RICHARD C  
4019 WEST 1ST STREET  
SANFORD, FL 32771 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FOX, RICHARD C  
Address: 609 PINEBRANCH CIRCLE  
City-St-Zip: WINTER SPRINGS, FL 32708 US

Title: MGRM ( ) Delete  
Name: BROPHY, BRIAN G  
Address: 50 LEANNI WAY SUITE A-5  
City-St-Zip: PALM COAST, FL 32137 US

Title: MGRM ( ) Delete  
Name: SHAWN, O'NEILL W  
Address: 4845 BELLE TERRE PARKWAY SUITE A-1  
City-St-Zip: PALM COAST, FL 32137 US

Title: MGRM ( ) Delete  
Name: COONE, JERRY  
Address: 4019 WEST 1ST STREET  
City-St-Zip: SANFORD, FL 32771

Title: MGRM ( ) Delete  
Name: JABE, LLC,  
Address: 4019 WEST 1ST STREET  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RICHARD C. FOX

MGRM

05/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date