2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000018648

1. Entity Name RON DEAN , LMT, LLC



FILED Apr 07, 2008 08:00 A Secretary of State

Principal Place of Business

13502 SOBRADO DR TAMPA, FL 33624 US Mailing Address

13502 SOBRADO DR TAMPA, FL 33624



04042008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	20-4404999

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEAN, RONALD J 13502 SOBRADO DR TAMPA, FL 33624		[225] See See See See See See See See See Se	NOT WRITE HIS SPACE	
	named entity submits this statement for the purpose of challing of registered agent. Signature, typed or printed name of registered agent and title if applicable	inging its registered office or registered agent, or both	n, in the State of Florida. I am familiar with, and acc	ept
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75		000000885778 04/18/08-80027-023 138.75	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR DEAN, RONALD J 13502 SOBRADO DR TAMPA, FL 33624			1
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP			NOT WRITE	
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TITLE NAME STREET ADDRESS CITY-ST-7IP	,			; ; ;

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: \ Conold \

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

RONALD J DEAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4 4 08

813-340-8230

Date

Daytime Phone #