## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT #L06000029417						CH C	n	
1. Entity Name BILLIE-BANNER PROPERTIES, LLC					FILED			
				TELES !	08 AUG -6 PM 12: 35			
Principal Place of Business Mailing Address 1111 9ALBOA AVENUE 1111 BALBOA AVENUE					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
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		L B. CALLER AND						
2. Principal Place of Business - No P.O. Box# 3760 JUNIPER LN:		3760 JUNIPER LN.			1 (004) 011	1010 EUR 1110 EUR 1111 1111	HA MINTE JANUS 1834 OFFICE HAVE LE	HTK (II IEC)
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			07072008	Chg-LLC	CR2E083 (12/06)	١.
ORMOND BEACH, FL		City & State ORMONIO BEACH, FL			4. FEI Numbe 20-833		<del></del>	pplied For ot Applicable
Zip Country		721711	Country			of Status Desired	S 5.00 Ad Fee Require	ditional
32174	6. Name and Address of Current F	Registered Agent			7. Name and	Address of New F		
LANE, K. JUDITH ESQ. 444 SEABREEZE BLVD., SUITE 900 DAYTONA BEACH, FL 32118				Name				
				Street Address (P.O. Box Number is Not Acceptable)				
	·		City			<del></del>		
The above named entity aubmits this statement for the purpose of changing its registers				· FL )				
	named entry audinitia tria statement for ions of registered agent.	the buspose or criending its o	aBistered outca o	register	o agen, or our	II, HI URE SIEGE OF TR	опов. Тан (алила мил	, and accept
SIGNATURE .	Sonature, typed or priviled name of registered agent as	nd tide if applicable. (NOTE:	Registered Agent signer	un mount	eften rekedeling)	<u> </u>	DATE	
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<b>Due</b> 9.	E NOWILL FEE IS \$538.75 by September 12, 2008 MANAGING MEMBER	RS/MANAGERS	10.				te check payable to a Department of Stat	
Due	E NOWILL FEE IS \$538.75 by September 12, 2008	-		MG	R.	ADDITIONS	se check payable to a Department of Stat	Addition
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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 cath; that I am a managing member or manager of the Ilmited liability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes.