


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # L06000031888	
1. Entity Name DONSTE PROPERTIES OF FLORIDA, LLC	

Principal Place of Business 7181 COLLEGE PARKWAY #32 FORT MYERS FL 33907 US	Mailing Address 7181 COLLEGE PARKWAY #32 FORT MYERS FL 33907 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E083 (10/07)

4. FEI Number 76-0829439	Applied For <input type="checkbox"/> No: Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
WITTER, STEVEN G 7181 COLLEGE PARKWAY #32 FORT MYERS FL 33907		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

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 _____ (NOTE: Registered agent's signature required when removing) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WITTER, STEVEN G 7181 COLLEGE PARKWAY FORT MYERS FL 33907 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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U00000860448
04/02/08-80064-008 138.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:  **MANAGER STEVEN WITTER** **3/15/08** **239-271-1215**