

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 09, 2008 8:00 am
Secretary of State

06-09-2008 90227 021 ***138.75

DOCUMENT # L06000033664 1. Entity Name PAM'S PROPERTIES LLC	
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Principal Place of Business 5950 SONOMA LANE NAPLES, FL 34119	Mailing Address 5950 SONOMA LANE NAPLES, FL 34119
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50006971



04162008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 45-2102116	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 CRESPO, PAMALA F 5950 SONOMA LANE NAPLES, FL 34119

**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.

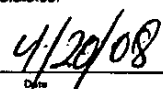
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when releasing) DATE _____

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 CRESPO, PAMALA F 5950 SONOMA LANE NAPLES, FL 34119
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**DO NOT WRITE
IN THIS SPACE**

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 Date Daytime Phone #