2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 11, 2008 8:00 am Secretary of State

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303 S.E. 17TH SIREET, #309-175 OCALA F. 34471 2. Principal Place of Business - No P.O. Box #	1. Entity Name						07-11-2008	90066 021 ***1	.38.75	
303.3 E. 171H SIREET, #309-175 OCALA F. 34471 2. Principal Place of Business - No P.O. Box # 2. Mealing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07072008 ChgLLC CR2E083 (12/06) City & State City & State 20-4098609 Application	Principal Plac	e of Business	Mailing Address			1		EGARGOCI) ,	
Surio, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. A, FEI Number 20-4908609 Not Applicable For Not Applicable Public Pub	303 S.E. 17	TH STREET, #309-175	303 S.E. 17TH STREET, #309-175			20008264				
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Country Zip Country St. Corrificate of Status Desired \$5.00 Additional Fee Required \$5.00 Additional Fee Required	City & Stat	e	City & State			1		⊢ →	 	
8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION COMPANY OF ORLANDO 300 SOUTH ORANGE AVE. SUITE 1000 (BMJ) ORLANDO, FL 32801-5403 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 Rorida. I am familiar with, and accept the burby September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limited by September 12, 2008 In accordance with s. 607, 193(2)(b), F. S., the limited limit	Zip	Country	Zip Country			\$5.00 Augstand				
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CORPORATION COMPANY OF ORLANDO 300 SOUTH ORANGE AVE. SUITE 1000 (BMJ) ORLANDO, FL 32801-5403 8. The above named entity submits this statement for the purpose of changing its registered attent obligations of registered agent. SIGNATURE Signature True Tr		6. Name and Address of Current	t Registered Agent	No		7. Name an	d Address of New I	Registered Agent	•	
SUTE 1000 (BMJ) ORLANDO, FL 32801-5403 City FL Zip Code	CORPORATION COMPANY OF ORLANDO				Name					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Signatu	300 SOUT SUITE 100	TH ORANGE AVE. 00 (BMJ)		Stre	et Address (P.O. Box Numl	per is Not Acceptabl	e)	,, <u>, , , , , , , , , , , , , , , , , ,</u>	
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 rame of registered agent and stell 4 epokable (NOTE, Registered Agent sequence required agent encounted when receibting) DATE	ORLANDO	D, FL 32801-5403		Cin		Tie Code				
SIGNATURE Signature Tribute T					,	FL Zip Code				
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TITLE NAME STREET ADDRESS CITY-ST-2P 1626 SE 7TH STREET OCALA, FL 34471 TITLE NAME STREET ADDRESS CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2										
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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 oath; that I am a managing member or manager of the limited liability company or the receiver or trusted appowered to execute this report as required by Chapter 608, Florida Statutes.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NA

OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8/00

Date

352) 373-2971

☐ Change

☐ Addition