

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061798

Entity Name: LEHIGH SEVEN, LLC

FILED
Mar 29, 2008
Secretary of State

Current Principal Place of Business:

9832 ROBINS NEST ROAD
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

9832 ROBINS NEST ROAD
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 01-0869493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, CATHY
17193 PHLOX DRIVE
FT. MYERS, FL 33912 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PHILLIPS CATHY,
Address: 17193 PHLOX DR
City-St-Zip: FT MYERS, FL 33967

Title: MGR () Delete
Name: JSK PROPERTIES, LLC,
Address: 9832 ROBINS NEST ROAD
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM () Delete
Name: MEROLA LOUIS,
Address: 8444 TAHITI ROAD
City-St-Zip: FT MYERS, FL 33967

Title: MGRM () Delete
Name: JODI TUCKER,
Address: 1633 PIONEER DRIVE
City-St-Zip: LAKE LAND, FL 33609

Title: MGRM () Delete
Name: MEROLA JOANNE,
Address: 8444 TAHITI ROAD
City-St-Zip: FT MYERS, FL 33967

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: PHILLIPS CATHY

MGRM

03/29/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date