

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000076643

FILED
Aug 19, 2008
Secretary of State

Entity Name: STOVALL PROPERTIES, LLC

Current Principal Place of Business:

2001 MISSION VALLEY BLVD
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

2001 MISSION VALLEY BLVD
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 20-5312606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

STOVALL, DEBRA
2001 MISSION VALLEY BLVD
NOKOMIS, FL 34275 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: MGR () Delete
Name: STOVALL, FRED
Address: 2001 MISSION VALLEY BLVD
City-St-Zip: NOKOMIS, FL 34275

Title: MGR () Delete
Name: STOVALL, ROSEMARY
Address: 2001 MISSION VALLEY BLVD
City-St-Zip: NOKOMIS, FL 34275

Title: MGR () Delete
Name: STOVALL, SCOTT
Address: 2001 MISSION VALLEY BLVD
City-St-Zip: NOKOMIS, FL 34275

Title: MGR () Delete
Name: STOVALL, DEBRA
Address: 2001 MISSION VALLEY BLVD
City-St-Zip: NOKOMIS, FL 34275

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:

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: SCOTT A. STOVALL

MGR

08/19/2008

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