## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L06000080304** 

1. Entity Name
MANDARIN LLC



FILED Feb 01, 2008 08:00 AN Secretary of State

Principal Place of Business

14984 MANDARIN ROAD JACKSONVILLE, FL 32223 Mailing Address

WILEY E. ANDREU 12842 WANDA LANE JACKSONVILLE, FL 32258



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number
NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDREU, WILEY E 12842 WANDA LANE JACKSONVILLE, FL 32258

STAEET ADDRESS CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

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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 reinstating)	DATE
	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANDREU, WILEY E 12842 WANDA LANE JACKSONVILLE, FL 32258		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000811480 02/12/08-80009-007 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE
INTLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE			

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.

1/21/08 Date

904-268-5191