

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2008 08:00 A
Secretary of State

DOCUMENT # L06000088031

1. Entity Name
SPRINGHILL PROPERTIES VII LLC



Principal Place of Business
4679 HIGHGROVE RD
TALLAHASSEE, FL 32309

Mailing Address
4679 HIGHGROVE RD
TALLAHASSEE, FL 32309



01042008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5508871

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANDERS, STEPHEN L
4679 HIGHGROVE RD
TALLAHASSEE, FL 32309

**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 reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

100000088031457
04/23/08-80027-007 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
SANDERS, STEPHEN L
4679 HIGHGROVE RD
TALLAHASSEE, FL 32309

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
SANDERS, WILLIAM A
3100 ELWOOD TR
TALLAHASSEE, FL 32309

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
SANDERS, JAMES R
1418 PINE STREAM CT
LAKE MARY, FL 32746

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**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:

Stephen L. Sanders

4/9/2008

850-907-9418

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #