

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 14, 2008 08:00 AM  
Secretary of State

DOCUMENT # L06000090652

1. Entity Name  
P & P DELISE ENTERPRISES, LLC



Principal Place of Business  
4581 SAMOSET DRIVE  
SARASOTA, FL 34241

Mailing Address  
4581 SAMOSET DRIVE  
SARASOTA, FL 34241



01052008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
20-8934653

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCLAUGHLIN, THOMAS J  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236

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 restateating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	DELISE, PETER A
STREET ADDRESS	4581 SAMOSET DRIVE
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	MGR
NAME	DELISE, PAMELA J
STREET ADDRESS	4581 SAMOSET DRIVE
CITY-ST-ZIP	SARASOTA, FL 34241
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000827665  
02/21/08-80100-004 138.75

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:

*Pamela J. DeLise*

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

2/12/08

Date

941-927-8752

Daytime Phone #