

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 01, 2008 8:00 am
Secretary of State

08-01-2008 90004 022 ***138.75

DOCUMENT # L06000096222

1. Entity Name
 CHRISTIAN TYLER PROPERTIES ONE, LLC



Principal Place of Business 2202 NORTH WEST SHORE BOULEVARD SUITE 200 TAMPA, FL 33607 US	Mailing Address 2202 NORTH WEST SHORE BOULEVARD SUITE 200 TAMPA, FL 33607 US
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07092008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

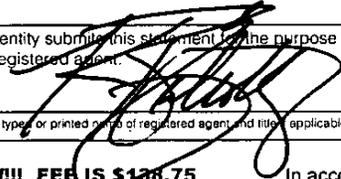
4. FEI Number 20-5643095	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

EICHOLTZ, KIRK D
 2202 NORTH WEST SHORE BOULEVARD
 SUITE 200
 TAMPA, FL 33607

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:  DATE: 7-9-08

Signature, typed or printed name of registered agent and title, applicable. (NOTE: Registered Agent signature required when reinstating)

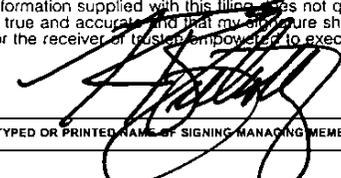
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EICHOLTZ, KIRK D 2202 NORTH WEST SHORE BOULEVARD, SUITE 200 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 of trust, empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  DATE: 7-9-08

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

Date 813-639-7583