

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103637

Entity Name: 1001 LLC

FILED
Apr 26, 2008
Secretary of State

Current Principal Place of Business:

2467 ROUND TABLE CT
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

2467 ROUND TABLE CT
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 20-5810674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TURNER, JERRY L
2467 ROUND TABLE CT
FT MYERS, FL 33912 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: MGRM () Delete
Name: GREENWELL, KEVIN
Address: 2467 ROUND TABLE CT
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM () Delete
Name: TURNER, KATHLEEN
Address: 2467 ROUND TABLE CT
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM () Delete
Name: TURNER, JERRY
Address: 2467 ROUND TABLE CT
City-St-Zip: FORT MYERS, FL 33912 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GREENWELL, KEVIN
Address: 10269 BELCREST BLVD
City-St-Zip: FORT MYERS, FL 33913 US

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: JERRY L TURNER

MGRM

04/26/2008

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