2008 LIMITED LIABILITY GOMPANY ANNUAL REPORT

FILED Feb 04, 2008 08:00 Al Secretary of State

DOCUMENT # L06000105	556	05)1(00	600	LC	#	JT	1FN	I۱	CI	חח
----------------------	-----	----	-----	----	-----	----	---	----	-----	----	----	----

1. Entity Name

DEFUNIAK SHOPPING PLAZA, LLC



Principal Place of Business

Mailing Address

100 JOHN KING ROAD CRESTVIEW, FL 32539 100 JOHN KING ROAD CRESTVIEW, FL 32539 US

DO NOT WRITE IN THIS SPACE

01172008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5840025

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CHAVEZ, ROGELIO 100 JOHN KING ROAD CRESTVIEW FL 32539

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the purpose of cha trons of registered agent.	nging its registered office or registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
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	· · · · · · · · · · · · · · · · · · ·	
IIITE	MGRM		
NAME	CHAVEZ, ROGELIO	·	U00000040001
STREET ADDRESS	100 JOHN KING ROAD		U00000812991
CITY-ST-ZIP	CRESTVIEW, FL 32539		02/12/08-80071-012 138.75

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

NAME

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY - ST - ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE

DO NOT WRITE IN THIS SPACE

THLE NAME STREET ADDRESS CITY-ST-ZIP

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:

MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPE

Daytime Phone #