2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 16, 2007 8:00 am Secretary of State

		7.11.107.1	- 11-1 - 111				Secreta	arv oi	DU.	ate
1. Entity Name	е	# L 06000109 ESTATES, LLC	9494			04-16-2007 90346 050 ****50.00				
Principal Place of Business 1265 HORSE & CHAISE BLVD. VENICE, FL 34285			Mailing Address 1265 HORSE & CHAISE BLVD. VENICE, FL 34285			U U U U U U U U U U U U U U U U U U U		B (81)) 5 (\$	10 7 (II 1 07 1	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			04102007	Chg-LLC	CR2E083 (2/06)	
City & State			City & State			4. FEI Numb	er		 	plied For t Applicable
Zip				Coun	try		e of Status Desired	Fee	00 Addi Required	
6. Name and Address of Current R			egistered Agent		*/	7. Name and	d Address of New R	egistered Agen	<u>t</u>	
	SE & CH/	AISE BLVD.			Street Addres	ss (P.O. Box Numb	er is Not Acceptable	2)		
VENICE, FL 34285										
		¥			City			FL ⁷	Zip Code	·
		ty submits this statement fatered agent.	or the purpose of changing its	registere	ed office or regis	stered agent, or bo	oth, in the State of Flo	orida. I am famili	ar with, a	and accept
SIGNATURE _	Signature types	d or printød name of registered agen	Land title if applicable (NOT	F: Registere	d Agent signature requ	uired when reinstating)		DATE		
	ang rate of typos									
Filing Fee is \$50.00 Due by May 1, 2007							Make check payable to Florida Department of State			
9.		MANAGING MEMB	ERS/MANAGERS	10.			ADDITIONS	CHANGES		
NAME STREET ADDRESS CITY-ST-ZIP	1265 HO	RS, MARY A TRUSTEE RSE & CHAISE BLVD. FL 34285	☐ Delete		1			0	Change	Addition
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indicated	on this repo	ort is true and accurate an	th this filing does not qualify fo d that my signature shall have see,empowered to execute this	the same	e legal effect as	if made under oat	h; that I am a mana	urther certify that ging member or	the info manage	rmation r of the
SIGNATURE: 4-11-67 941- SIGNATURE AND TYPED OR PRINTED NAME OF A SIGNING MANAGER, OR AUTHORIZED REPRESENTATIVE Date Dayling Phone #										
SIGNAT	URE:	AND TYPED OR PRINTED NAME	OF SIGNING MANAGING MEMBER, MA	NAGER. OF	AUTHORIZED REPR		c 7	493-6 Daytime	Phone #	16-
	- JIMA I OHE									

Star L Loobuts

ATTACHMENT 60036925



Division of Corporations

2007 Annual Report

Listed below is the most recent information reported for the entity.

Please review and click the appropriate button at the bottom to generate the annual report form.

This information cannot be changed on the report.

Document Number L06000109494

Business Entity Name FOUNTAINVIEW ESTATES, LLC

Original File Date H/09/2006

FEI Number

Principal Address 1265 HORSE & CHAISE BLVD.

VENICE, FL 34285

Mailing Address 1265 HORSE & CHAISE BLVD.

VENICE, FL 34285

Registered Agent SAM R RODGERS

1265 HORSE & CHAISE BLVD.

VENICE, FL 34285

Managing Member/Manager Name And Address

MGR TRUSTEE MARY A RODGERS 1265 HORSE & CHAISE BLVD. VENICE, FL 34285

Les yes

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