

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L06000109639**

1. Entity Name  
**ALLURE ENTERPRISES, LLC**



Principal Place of Business  
**36643 SPARROW LANE  
GRAND ISLAND, FL 32735**

Mailing Address  
**36643 SPARROW LANE  
GRAND ISLAND, FL 32735**



02292008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-5876101**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**DAVIS, BENJAMIN R  
36643 SPARROW LANE  
GRAND ISLAND, FL 32735**

**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 reinstating)

DATE \_\_\_\_\_

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

UD00000923665  
05/16/08-80039-019 143.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	DAVIS, BENJAMIN R
STREET ADDRESS	36643 SPARROW LANE
CITY-ST-ZIP	GRAND ISLAND, FL 32735
TITLE	MGRM
NAME	DAVIS, KARIE A
STREET ADDRESS	36643 SPARROW LANE
CITY-ST-ZIP	GRAND ISLAND, FL 32735
TITLE	MGRM
NAME	HRITZIK, MICHAEL III
STREET ADDRESS	10402 BARRINGTON COURT
CITY-ST-ZIP	LEESBURG, FL 34788
TITLE	MGRM
NAME	HRITZIK, ALYSA L
STREET ADDRESS	10402 BARRINGTON COURT
CITY-ST-ZIP	LEESBURG, FL 34788
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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.