


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L06000117354</b> 1. Entity Name <b>SPENCER TOWERS, LLC</b>		
Principal Place of Business <b>2429 WATERMILL DRIVE ORANGE PARK, FL 32073</b>	Mailing Address <b>2429 WATERMILL DRIVE ORANGE PARK, FL 32073</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  <b>NICHOLS, JOHN CPA 1329 KINGSLEY AVE ORANGE PARK, FL 32073</b>		<b>DO NOT WRITE IN THIS SPACE</b>
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: _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>		
9. MANAGING MEMBERS/MANAGERS		<b>DO NOT WRITE IN THIS SPACE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM SPENCER, JOHN W 2429 WATERMILL DRIVE ORANGE PARK, FL 32073</b>	
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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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		
SIGNATURE: <u>                    </u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SHOWING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<u>3/3/08</u> <u>904.219.4389</u> <small>Date Daytime Phone #</small>



03032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>19-0663538</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> Additional Fee Required	

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03/21/08-80021-019 138.75