

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019104

FILED
Mar 11, 2008
Secretary of State

Entity Name: ROB AND LAUREL EGAN, LLC

Current Principal Place of Business:

17 NW 38TH PLACE
CAPE CORAL, FL 33993

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 1267
NOKOMIS, FL 342741267

New Mailing Address:

FEI Number: 06-1807884

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNS, CHRISTINE
613 BARNES PKWY
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

JOHNS, CHRISTINE M
613 BARNES PKWY
NOKOMIS, FL 34275 US

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: CHRISTINE M. JOHNS

03/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: EGAN, LAUREL
Address: 17 NW 38TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: MGR () Delete
Name: EGAN, ROBERT
Address: 17 NW 38TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

ADDITIONS/CHANGES:

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: LAUREL A. EGAN

MGR

03/11/2008

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