

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000039116

Entity Name: 49 JULIETLIMA, LLC

FILED
Jan 09, 2008
Secretary of State

Current Principal Place of Business:

226 E. ESTHER STREET
ORLANDO, FL 32806

New Principal Place of Business:

2415 NW 59TH TERR
GAINESVILLE, FL 32606

Current Mailing Address:

226 E. ESTHER STREET
ORLANDO, FL 32806

New Mailing Address:

2415 NW 59TH TERR
GAINESVILLE, FL 32606

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOLTENS, JOHN G II
226 E. ESTHER STREET
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

SCHOLTENS, JOHN G II
2415 NW 59TH TERR
GAINESVILLE, FL 32606 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: JOHN SCHOLTENS

01/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHOLTENS, JOHN G II
Address: 226 E. ESTHER STREET
City-St-Zip: ORLANDO, FL 32806

Title: MGRM () Delete
Name: SCHOLTENS, LINDA S
Address: 226 E. ESTHER STREET
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHOLTENS, JOHN G II
Address: 2415 NW 59TH TERR
City-St-Zip: GAINESVILLE, FL 32606

Title: MGRM (X) Change () Addition
Name: SCHOLTENS, LINDA S
Address: 2415 NW 59TH TERR
City-St-Zip: GAINESVILLE, FL 32606

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: LINDA SCHOLTENS

MGRM

01/09/2008

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