2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 14, 2008 8:00 am Secretary of State

DOCUMENT # L07000071026 1. Entity Name ELLIJAY GETAWAY, LLC						01-14-2008	90048 05		8.75
Principal Place	e of Business	Mailing Address	-			600014	(0		
3430 27TH A		3430 27TH AVE. SW				0000			
NAPLES, FL	34117	NAPLES, FL 34117							
2. Principal Pl	lace of Business - No P.O. Box #	3. Mailing Address						60 4 11040	(89)
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092008	Chg-LLC	CR2E08	33 (12/06)		
City & State	9	City & State			4. FEI Numbe			. ,	oplied For
		, , , , , , , , , , , , , , , , , , , ,				26-049	9992	No.	ot Applicable
Zip	Country	Zip	Countr	ſy	5. Certificate	of Status Desired		5.00 Add	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New Re			
MICKEDSO	NI DODEDTE			Name					
NICKERSON, ROBERT F 3430 27TH AVE. SW				Street Address (P.O. Box Number is Not Acceptable)					
NAPLES, FL 34117			-						
	÷		-	City				Zip Cod	
0 Thb			الببا				FL	<u></u>	
	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registered	a office or register	red agent, or bott	n, in the State of Flo	rida. Tam ta	amiliar with,	and accept
SIGNATURE .									
FILE After May	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75			Agent signature required			e check pa		
	•	•				Florida	Departme	nt of Stat	6 1
9.	MANAGING MEMBE		10.			Florida ADDITIONS/	** * .	nt of Stat	8
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		RS/MANAGERS	TITLE NAME	I ADDRESS			** * .		
TITLE NAME	MGRM NICKERSON, ROBERT F	RS/MANAGERS Delete	TITLE NAME STREE				** * .		
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11. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 1.19, 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.

MANAGER

1-9-08 239-250-6379