## 2008 LIMITED LIABILITY COMPANY

## **FILED** Feb 13, 2008 8:00 am Secretary of State 02-13-2008 90062 024 \*\*\*138.75

TOOU SHALL STANDING I COMMING	•
ANNUAL REPORT	
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D C C U 4 E 1 E "   07000070507	

1. Entity Nam	MENT # L07000072 HOUSE L.L.C.	587		02-	13-2008 90062	024 ***138	8.75		
Principal Plac	e of Business	Mailing Address			ายคลาค				
2519 ELDERBERRY DRIVE CLEARWATER, FL 33761 US		2519 ELDERBERRY DRIVE CLEARWATER, FL 33761 US		600	107777				
					(1 <b>88</b> 0% ( <b>88</b> 0) <b>(88</b> 0) <b>(88</b> 0) <b>(8</b>				
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apl. #, etc.		02102008	Chg-LLC	CR2E083	3 (12/06)		
City & State		City & State		4. FEI Numb	057119	<u></u>	<u> </u>	plied Fo	
Žip	Country	Zip	Country		e of Status Desired	□ \$!	5.00 Add		
	6. Name and Address of Current	Registered Agent		7. Name an	d Address of New I		•		
MATRING	CEODGE D		Name						
WATKINS, GEORGÉ R 2519 ELDERBERRY DRIVE CLEARWATER, FL 33761			Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
	,								
			City			FL	Zip Cod	е	
the obligat	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent  NOW!!! FEE IS \$138.75  71, 2008 Fee will be \$538.75	and title II applicable. (NOTE: F	GISTERED OFFEG		, Mai	DATE ke check pay a Departmen	rable to		
9.	MANAGING MEMBE	RS/MANAGERS	10.	<u> </u>	ADDITIONS	/CHANGES			
TITLE	MGRM	☐ Delete	TITLE				Change	Ad	
NAME	WATKINS, GEORGE R		NAME OFFICE ADDRESS						
STREET ADDRESS CITY-ST-ZIP	2519 ELDERBERRY DRIVE CLEARWATER, FL 33761		STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP	MGRM WATKINS, KATHERINE L 2519 ELDERBERRY DRIVE CLEARWATER, FL 33761	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Ad	
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<sup>11.</sup> I hereby certify that the information supplied with this filling 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.