


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT


FILED
Mar 21, 2008 8:00 am
Secretary of State

02-07-2008 90086 049 ***138.75

DOCUMENT # L07000097566	
1. Entity Name DECRESCENZO, LLC	

Principal Place of Business 11538 DODDWOOD DR ESTERO, FL 33928-7632	Mailing Address 11538 DODDWOOD DR ESTERO, FL 33928-7632
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

	
01042008	Chg-LLC
CR2E083 (12/06)	
4. FEI Number	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	
DECRESCENZO, ANTHONY 11538 DODDWOOD DR ESTERO, FL 33928-7632	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DECRESCENZO, ANTHONY 11538 DODDWOOD DR ESTERO, FL 339287632 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DECRESCENZO, KATHERINE M 11538 DODDWOOD DR ESTERO, FL 339287632 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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  3/19/08

Anthony DeCrescenzo, Jr. ATTACHMENT
11538 Doddwood Drive
Estero, FL 33928

30002631
#L07000097566

March 19, 2008

Division of Corporations
P. O. Box 6478
Tallahassee, FL 32314

Sorry for the delay in returning this form to you.

Tony DeCrescenzo

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