2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # L99000002626

1. Entity Name
LINEBAUGH SHELDON, L.C.

Principal Place of Business	Mailing Address
3641 W. KENNEDY BLVD., SUITE A TAMPA, FL 33609	3641 W. KENNEDY BLVD., SUITE A TAMPA, FL 33609

DO NOT WRITE IN THIS SPACE

03032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
59-3574580
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BARNETT, LESLIE J
BARNETT, BOLT, KIRKWOOD, STE 700
601 BAYSHORE BLVD., STE 700
TAMPA, FL 33606

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MEM
NAME	AR-JOY OF TAMPA, INC.
STREET ADDRESS	3641 W. KENNEDY BLVD., SUITE A
CITY-ST-ZIP	TAMPA, FL 33609
TITLE	MEM
NAME	FOURSOME PROPERTIES, INC.
STREET ADDRESS	3641 W. KENNEDY BLVD., SUITE A
CITY-ST-ZIP	TAMPA, FL 33609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000874686
04/11/08-80002-015 138.75

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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: _____ 3/26/08 (813) 353-2220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #