

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # M04000001901	
1. Entity Name FOUR AMIGOS PROPERTIES, LLC	

Principal Place of Business 10611 RIVERBANK TERRACE BRADENTON FL 34212	Mailing Address 10611 RIVERBANK TERRACE BRADENTON FL 34212
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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	Zip	Country

1st MOORE CR2E083 (10/07)

4. FEI Number 20-0802217	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent DOBBINS, MICHAEL 10611 RIVERBANK TERRACE BRADENTON FL 34212	
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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: Register all Agent's signature required when registering) 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	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCMAHON, JAMES P 31780 GARDENSIDE DR AVON LAKE OH 44012 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DOBBINS, MICHAEL 10611 RIVERBANK TERRACE BRADENTON FL 34212 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MASINO, DALE 575 DARTMOOR WAY SW OCEAN ISLE BEACH SC 28469 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM REPP, WILLIAM 4496 DUNLIN CT NAPLES FL 34119 ☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	02/13/08-80049-005-138.75 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *William Repp* **William Repp** *Masino Dale* *1-31-08* *239-207-0028*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date: _____