

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L00000002348</b>	
1. Entity Name <b>JEANNINE'S FRENCH MAID BAKERY, LLC</b>	
Principal Place of Business <b>1260 CENTRAL FLORIDA PARKWAY ORLANDO, FL 32837</b>	Mailing Address <b>1260 CENTRAL FLORIDA PARKWAY ORLANDO, FL 32837</b>



01202005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>36-4351176</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

**DARMOC, DENNIS  
1260 CENTRAL FLORIDA PARKWAY  
ORLANDO, FL 32837**

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$50.00  
Due by May 1, 2005**

1100000322192  
04/22/05-80004-008 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>P WOODSBY, RONALD 1260 CENTRAL FLORIDA PARKWAY ORLANDO, FL 32837</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>ST DARMOC, DENNIS 1950 LEGION DRIVE WINTER PARK, FL 32789</b>
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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** Dennis P. Darmoc Sec (Treas) **4/19/05** **407 851-8400**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #