

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000005353**

1. Entity Name  
**D.F. MCDONOUGH, LLC**



Principal Place of Business  
**6468 PARKLAND DRIVE  
SARASOTA, FL 34243**

Mailing Address  
**6468 PARKLAND DRIVE  
SARASOTA, FL 34243**



02182004No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-1023556**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**MCDONOUGH, DONALD F  
6468 PARKLAND DRIVE  
SARASOTA, FL 34243**

**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 signature required when removing.)

DATE \_\_\_\_\_

**Filing Fee is \$55.00  
Due by May 1, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MGRM  
MCDONOUGH, DONALD F  
6468 PARKLAND DRIVE  
SARASOTA, FL 34243**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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03/06/04-80046-014 50.00

**DO NOT WRITE  
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)(i), 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Day's in Phone #