

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L00000007460 1. Entity Name SEVINTUNA & SEVINTUNA, LLC	
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Principal Place of Business 3041 FAYE RD JACKSONVILLE, FL 32226	Mailing Address 3041 FAYE RD JACKSONVILLE, FL 32226
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04272006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3037613	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent MILLER, RANDELL M 315 SOUTH HYDE PARK AVENUE TAMPA, FL 33606
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEVINTUNA, NEIL 3041 FAYE RD. JACKSONVILLE, FL 32226
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SEVINTUNA, AVA 3041 FAYE RD. JACKSONVILLE, FL 32226
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000000547273 05/12/06-80017-018 50.00 DO NOT WRITE IN THIS SPACE

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 Ava Sevintuna Ava Sevintuna 4/28/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #