

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 02, 2005 8:00 am
Secretary of State

03-02-2005 90014 005 ****50.00

DOCUMENT # L01000003187

1. Entity Name

HIGH SPEED PERFORMANCE, LLC



Principal Place of Business

4200 4TH STREET NORTH, STE. D
ST PETERSBURG FL 33703

Mailing Address

4200 4TH STREET NORTH, STE. D
ST PETERSBURG FL 33703

2. Principal Place of Business

11001 DANKA WAY N.

3. Mailing Address

11001 DANKA WAY N.

Suite, Apt. #, etc.

UNIT #3

Suite, Apt. #, etc.

UNIT #3

City & State

ST. PETERSBURG, FL

City & State

ST. PETERSBURG, FL

Zip

33716

Country

USA

Zip

33716

Country

USA



1st MOORE

CR2E083 (10/04)

4. FEI Number

59-3703474

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARGER, MICHAEL E
4200 4TH STREET NORTH, STE. D
ST PETERSBURG FL 33703

7. Name and Address of New Registered Agent

Name **MICHAEL E. BARGER**

Street Address (P.O. Box Number is Not Acceptable)

11001 DANKA WAY N.

UNIT #3

City **ST. PETERSBURG**

FL

Zip Code

33716

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]

MICHAEL E. BARGER

2-15-05

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **BARGER, MICHAEL E JR.**
STREET ADDRESS **4200 4TH STREET NORTH, STE. D**
CITY-ST-ZIP **ST PETERSBURG FL 33703**

TITLE **MGR** ☐ Delete
NAME **BAUMAN, ROBERT B**
STREET ADDRESS **4200 4TH STREET NORTH, STE. D**
CITY-ST-ZIP **ST PETERSBURG FL 33703**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11001 DANKA WAY N. UNIT #3**
CITY-ST-ZIP **ST. PETERSBURG, FL 33716**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **11001 DANKA WAY N. UNIT #3**
CITY-ST-ZIP **ST. PETERSBURG, FL 33716**

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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]

MICHAEL E. BARGER

2-15-05

727-520-7711

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

Date

Daytime Phone #