

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000003395

1. Entity Name
SUZY'S CAKES, L.L.C.



Principal Place of Business
5353 FAWN WOODS COURT
SANFORD, FL 32771

Mailing Address
5353 FAWN WOODS COURT
SANFORD, FL 32771

% B, -, , , , , / / 519 &

04292004 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
59-3699812

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KOCAY, SUSAN K
5353 FAWN WOODS COURT
SANFORD, FL 32771

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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

Susan K. C. Kocay
Signature, typed or printed name of registered agent and fee if applicable

SUSAN K. C. KOCAY
(NOTE: Registered Agent signature required when reinstating)

4/29/04
DATE

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
KOCAY, SUSAN
5353 FAWN WOODS CT
SANFORD, FL 32771

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05/03/04-90200-025 50.00

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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:

Susan K. C. Kocay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/29/04
Date

407-321-1418
Daytime Phone #