


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000005658 1. Entity Name JOHNNY PETRANDIS II, LLC	
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Principal Place of Business
4178 APALACHEE PKWY
TALLAHASSEE, FL 32311

Mailing Address
4178 APALACHEE PKWY
TALLAHASSEE, FL 32311



01052005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3634428	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PETRANDIS, JOHNNY II
4178 APALACHEE PKWY
TALLAHASSEE, FL 32311

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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 reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PETRANDIS, JOHNNY II 4178 APALACHEE PKWY TALLAHASSEE, FL 32311
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01/24/05-80089-009 50.00

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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)(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 _____

Daytime Phone # _____