

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000017734

1. Entity Name
F.C. UNITED, LLC



Principal Place of Business
ATTN: GREGORY P. BRICK
1114 LYNX TRAIL
WINTER SPRINGS, FL 32708

Mailing Address
ATTN: GREGORY P. BRICK
1114 LYNX TRAIL
WINTER SPRINGS, FL 32708

DO NOT WRITE IN THIS SPACE



02092004No Chg-LLC

CR2E083 (10/03)

4. FEI Number
30-0062457

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRICK, GREGORY P
1114 LYNX TRAIL
WINTER SPRINGS, FL 32708

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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 holder must print name of registered agent and title (see above).

FEI Number and Agent signature required when certified copy.

DATE _____

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

000000050287
02/16/04-80003-017 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY ST ZIP	P BRICK, GREGORY P 1114 LYNX TRAIL WINTER SPRINGS, FL 32708
TITLE NAME STREET ADDRESS CITY ST ZIP	VP AVALLONE, JOSEPH 4575 TIGUA ISLAND CT WINTER PARK, FL 32792
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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)(c), 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

Greg Brick

2-9-04

321-231-8814

DATE

PHONE NUMBER