

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90022 036 ***150.00

DOCUMENT # L02000001899

1. Entity Name
SIRAGUSA, LLC



Principal
Siragusa, L.L.C.
d/b/a Granny NANNIES
6017 Dr. MLK Street North
St. Petersburg, Florida 33703

Address
1 ST. NORTH
PETERSBURG, FL 33704

60036215



04182006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0602983

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIRAGUSA, PAUL
820 38TH AVE. N.E. 14160 82ND TERRACE N.
ST. PETERSBURG, FL 33704
Seminole, Florida 33776

**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 PAUL SIRAGUSA

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

(NOTE: Registered Agent signature required when reinstating)

4/20/06

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIRAGUSA, PAUL 447 3RD AVE N. #308 6017 Dr MLK Jr. ST. N SAINT PETERSBURG, FL 33704 33703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIRAGUSA, ELIZABETH 447 3RD AVE N. #308 6017 Dr. MLK Jr. ST N. SAINT PETERSBURG, FL 33704 33703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM EARLE, JODI 447 3RD AVE N. #308 6017 Dr. MLK Jr. ST. N SAINT PETERSBURG, FL 33704 33703
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIRAGUSA, JIM 3314 Henderson Blvd, Ste 205 Tampa, Florida 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: [Signature]

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

4/20/06 (721) - 394-2522

Date

Daytime Phone #