2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000010848

Entity Name

THE SCROUNGE AROUND SHOP, L.L.C.



FILED Feb 17, 2005 · 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

848 DAUGHTERY ROAD WEST LAKELAND, FL 33809 848 DAUGHTERY ROAD WEST LAKELAND, FL 33809

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02152005No Chg-LLC

CR2E083 (10/03)

5. Certificate of Status Desired	\$5.00 Fee Re	Additional quired
NOT APPLICABLE		Not Applicable
4. FEI Number		Applied For

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

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

MEINKE, MARY L 848 DAUGHTERY ROAD WEST LAKELAND, FL 33809

DO NOT WRITE IN THIS SPACE

2-15-05

Daytime Phone #

SIGNATURE.	Signature, typed or pyryled name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fi	ling Fee is \$50.00 ue by May 1, 2005	,	
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MEINKE, MARY L 848 DAUGHTERY RD W LAKELAND, FL 33809		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u> ը։ Նեւ 11.04 Ծի</u> ինու _ր. բ. հին
TITLE NAME STREET ADORESS CITY-ST-ZIP		DO	NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not qua on this report is true and accurate and that my signature shall bility company or the receiver or trustee empowered to execut	lify for the exemption stated in Section 119.07(3 have the same legal effect as if made under oat e this report as required by Chapter 608, Florida	(i), Florida Statutes. I further certify that the information in that I am a managing member or manager of the Statutes.

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. 1 am familiar with, and accept