

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2007 08:00 A
Secretary of State

DOCUMENT # L02000011566

1. Entity Name
LONGBEARD, LLC



Principal Place of Business

2651 WHITFIELD AVE.
SUITE 101
SARASOTA, FL 34243

Mailing Address

2651 WHITFIELD AVE.
SUITE 101
SARASOTA, FL 34243



02122007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3683495

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREGORY, STUART M
2651 WHITFIELD AVE
SUITE 101
SARASOTA, FL 34243

**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

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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME GREGORY, STUART M
STREET ADDRESS 2651 WHITFIELD AVE. SUITE 101
CITY-ST-ZIP SARASOTA, FL 34243

TITLE MGRM
NAME GREGORY, W. STUART
STREET ADDRESS 2651 WHITFIELD AVE. SUITE 101
CITY-ST-ZIP SARASOTA, FL 34243

TITLE MGRM
NAME SPEARS, TRUDI A
STREET ADDRESS 2651 WHITFIELD AVE SUITE 101
CITY-ST-ZIP SARASOTA, FL 34243x

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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04/29/07-80004-022 50.00

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

Date

Daytime Phone #

Stuart M. Gregory 4/12/07 941-227-4446