

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 22, 2007 08:00 A
Secretary of State

DOCUMENT # L02000014119

1. Entity Name
AMERICAN PRIDE ENTERPRISES, L.L.C.



Principal Place of Business
8210 GALEN WILSON BLVD.
PORT RICHEY, FL 34668

Mailing Address
8210 GALEN WILSON BLVD.
PORT RICHEY, FL 34668



01042007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
81-0557549

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PIANO, DOMINIC
8210 GALEN WILSON BLVD.
PORT RICHEY, FL 34668

**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	PIANO, DOMINIC
STREET ADDRESS	8210 GALEN WILSON BLVD.
CITY-ST-ZIP	PORT RICHEY, FL 34668
TITLE	MGRM
NAME	PIANO, ANGELINA
STREET ADDRESS	8210 GALEN WILSON BLVD.
CITY-ST-ZIP	PORT RICHEY, FL 34668
TITLE	MGRM
NAME	TEELON, CHARLES
STREET ADDRESS	3032 SOUTH PENINSULA DRIVE
CITY-ST-ZIP	DAYTONA BEACH, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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03/30/07-80063-004 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 #

3/20/07 727-841-6248