

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000019707

1. Entity Name
LADORA, L.L.C.



Principal Place of Business
**2710 EDGEWATER DR.
NICEVILLE, FL 32578**

Mailing Address
**2710 EDGEWATER DR.
NICEVILLE, FL 32578**



04102007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0703299

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HORVATH, LADD M
2710 EDGEWATER DR.
NICEVILLE, FL 32578**

**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)

**Filing Fee is \$50.00
Due by May 1, 2007**

DATE
05/23/07-80057-004 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HORVATH, LADD M 2710 EDGEWATER DR. NICEVILLE, FL 32578
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HORVATH, DORA L 2710 EDGEWATER DR. NICEVILLE, FL 32578
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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

LADD M. HORVATH

27 Apr 07

850-585-7810

Date

Daytime Phone #