

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 06, 2005 8:00 am
Secretary of State

09-06-2005 90046 022 ****50.00

DOCUMENT # L02000025258

1. Entity Name
BUSINESS CENTRAL OF SARASOTA, LLC



Principal Place of Business
**1360 WHITFIELD AVE.
SARASOTA, FL 34243 US**

Mailing Address
**1360 WHITFIELD AVE.
SARASOTA, FL 34243 US**



07212005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
32-0033619

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CULLEM, JOHN P ESQUIRE
856 2ND AVE. NORTH
ST. PETERSBURG, FL 33701**

**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 September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
MCNAIR, JOEL
1360 WHITFIELD AVE.
SARASOTA, FL 34243**

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 exemption stated in Section 119.07(3)(i), 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 606, Florida Statutes.

SIGNATURE: Joel Mc Nair

9-1-05

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

Date

Daytime Phone #