

2004-LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 11, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000027063					
1. Entity Name DUNBAR'S ANTIQUES & COLLECTIBLES, LLC					
Principal Place of Business 2610 PEMBERTON CREEK DRIVE SEFFNER FL 33584			Mailing Address 2610 PEMBERTON CREEK DRIVE SEFFNER FL 33584		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 47-0905187	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	



MOORE CR2E083 (11/03)

6. Name and Address of Current Registered Agent DUNBAR, SAUNDRA B 2610 PEMBERTON CREEK DRIVE SEFFNER FL 33584		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DUNBAR, SAUNDRA B 2610 PEMBERTON CREEK DRIVE SEFFNER FL 33584 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000000085244 03/11/04-80040-004 50.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM DUNBAR, WADE E 2610 PEMBERTON CREEK DRIVE SEFFNER FL 33584 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 608, Florida Statutes.

SIGNATURE: *Saundra B. Dunbar* **3-6-04** **813-685-2724**