

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2007 8:00 am
Secretary of State

01-18-2007 90079 038 ****50.00

DOCUMENT # L02000027868

1. Entity Name
SRQ HOLDINGS I, LLC



Principal Place of Business
200 SOUTH ORANGE AVE.
C/O GEORGE A. DIETZ
SARASOTA, FL 34236

Mailing Address
200 SOUTH ORANGE AVE.
C/O GEORGE A. DIETZ
SARASOTA, FL 34236

2. Principal Place of Business - No P.O. Box #
1620 North Lodge Drive

3. Mailing Address
1620 North Lodge Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Sarasota, Florida

City & State
Sarasota, Florida

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip
34239

Country
USA

Zip
34239

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DIETZ, GEORGE A
200 SOUTH ORANGE AVE.
SARASOTA, FL 34236

Name

Street Address (P.O. Box Number is Not Acceptable)
1620 North Lodge Drive

City
Sarasota

FL

Zip Code
34239

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**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
DIETZ, GEORGE A
200 S. ORANGE AVE.
SARASOTA, FL 34236 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
1620 North Lodge Drive
Sarasota, FL 34239 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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: George A. Dietz George A. Dietz

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

1/13/07 941/955-8258

Date

Daytime Phone #