

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90025 013 ****50.00

DOCUMENT # L02000031026



1. Entity Name
WOODPECKER INDUSTRIES LLC

Principal Place of Business
**38 W. 9TH STREET
ATLANTIC BEACH, FL 32233**

Mailing Address
**38 W. 9TH STREET
ATLANTIC BEACH, FL 32233**

2. Principal Place of Business

3. Mailing Address



Suite, Apt. #, etc.

Suite, Apt. #, etc.

04222004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
05-0540650

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**GLEMANN, RICHARD
1122 3RD STREET, SUITE 3
NEPTUNE BEACH, FL 32266**

7. Name and Address of New Registered Agent

Name **STEPHEN A. HOULD**

Street Address (P.O. Box Number is Not Acceptable)

920 THIRD STREET SUITE D

City **NEPTUNE BEACH**

FL

Zip Code
32266

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

Stephen A. Hould **STEPHEN A. HOULD**

APRIL 29, 2004

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, 2004**

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

9. MANAGING MEMBERS / MANAGERS

TITLE **MGRM** ☐ Delete
NAME **GORDON, RUSSELL JR**
STREET ADDRESS **38 W. 9TH STREET**
CITY-ST-ZIP **ATLANTIC BEACH, FL 32233**

TITLE **MGRM** ☐ Delete
NAME **GORDON, JIMMY A**
STREET ADDRESS **38 W. 9TH STREET**
CITY-ST-ZIP **ATLANTIC BEACH, FL 32233**

TITLE **MGRM** ☐ Delete
NAME **GORDON, RUSSELL**
STREET ADDRESS **38 W. 9TH STREET**
CITY-ST-ZIP **ATLANTIC BEACH, FL 32233**

TITLE **MGRM** ☐ Delete
NAME **MISURACA, VINCENT**
STREET ADDRESS **38 W. 9TH STREET**
CITY-ST-ZIP **ATLANTIC BEACH, FL 32233**

TITLE **MGRM** ☐ Delete
NAME **TEELON, CHARLES W**
STREET ADDRESS **38 W. 9TH STREET**
CITY-ST-ZIP **ATLANTIC BEACH, FL 32233**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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:

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

Date

Daytime Phone #

4/28/04 **4/28/04** **904-477-6998**