2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L02000033413

1. Entity Name

GENT'S FORMAL WEAR, LLC



FILED Mar 10, 2008 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

400 EAST WRIGHT STREET PENSACOLA, FL 32501 400 EAST WRIGHT STREET PENSACOLA, FL 32501



03032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 41-7766043

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

CRENSHAW, RICHARD C 400 EAST WRIGHT STREET PENSACOLA, FL 32501

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	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 ac	cept
	the obligations of registered agent.		
01	IONATURE.		

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000854072 03/26/08-90095-005 138.75

DATE

9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGR			
NAME	CRENSHAW, RICHARD C			
STREET ADDRESS	400 EAST WRIGHT STREET			
CITY-ST-ZIP	PENSACOLA, FL 32501			
TITLE				
NAME				
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CITY-ST-ZIP				
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71116				

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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 seceiver or truespe, empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

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

7/6/08

850-434-3272

Daytime Phone #