

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

02-17-2004 90196 003 ****50.00

DOCUMENT # L03000005916					
1. Entity Name HASTINGS GARAGE DOOR CO., LLC					
Principal Place of Business 2003 VISCOUNT ROW ORLANDO FL 32809			Mailing Address 2003 VISCOUNT ROW ORLANDO FL 32809		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 04-3747883			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent FOUST, KATHLEEN M 17 S. ORLANDO AVE KISSIMMEE FL 34741			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agents signature required when reappointing)					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004					
9. MANAGING MEMBERS/MANAGERS					
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	TITLE	NAME
	George Hastings	2003 Viscount Row	Orlando, FL 32809		
	Mary Hastings	2003 Viscount Row	Orlando, FL 32809		
10. ADDITIONS/CHANGES					
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: <i>Mary O'Halloran</i>				2-10-04 407-859-0080	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date Daytime Phone #	