

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012960

Entity Name: LINDA D. SCHOONOVER, LLC

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

982 DOUGLAS AVE.
STE. 104
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

982 DOUGLAS AVE.
STE. 104
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 37-1463780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHOONOVER, LINDA D
111 HUNTER'S TRAIL
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CARLEY, WILLIAM D
Address: 111 HUNTERS TRL.
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: SCHONOVER, LINDA D
Address: 111 HUNTERS TRL.
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SCHOONOVER, LINDA D
Address: 111 HUNTERS TRL.
City-St-Zip: LONGWOOD, FL 32779

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: LINDA D. SCHOONOVER

PRES

01/04/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date