


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2005 08:00 AM
Secretary of State


DOCUMENT # L03000017152
 1. Entity Name
 FOR 27, LLC



Principal Place of Business
 4100 RECKER HWY.
 WINTER HAVEN, FL 33880

Mailing Address
 4100 RECKER HWY.
 WINTER HAVEN, FL 33880

DO NOT WRITE IN THIS SPACE



01272005No Chg-LLC CR2E083 (10/03)

4. FEI Number 55-0842348	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FRASIER, DONALD W
 4100 RECKER HWY.
 WINTER HAVEN, FL 33880

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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 _____ (NOTE Registered Agent signature required when reissuing) _____ DATE _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FRASIER, DONALD W 100 TWIN COVE AUBURNDALE, FL 33823
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RILEY, DARRYL L 250 POST RD POLK CITY, FL 33868
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OWEN, PHILIP C 155 TWIN COVE AUBURNDALE, FL 33823
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Donald W Frasier 4-8-05 863-967-5177
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #