


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000020112 1. Entity Name FIN & FIN, L.L.C.	
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Principal Place of Business 6900 DANIELS PKWY FORT MYERS, FL 33912	Mailing Address 6900 DANIELS PKWY FORT MYERS, FL 33912
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03022005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 87-0699353	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FINNERY, STEVEN R 3983 SPYGLASS HILL DRIVE SARASOTA, FL 34238
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**DO NOT WRITE
IN THIS SPACE**

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 _____
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, 2005**

U00000296406
04/09/05-80066-019 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FINNERY, STEVE 3983 SPYGLASS HILL RD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FINNERY, JEAN 3983 SPYGLASS HILL RD SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROACH, SARAH 9134 PALM ISLAND CIR FORT MYERS, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Sarah J. Roach - SARAH J. ROACH 4/6/05 239-768-3445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #