


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000021174 1. Entity Name PIRATE, L.L.C.	
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01172008No Chg-LLC

CR2E083 (12/07)

Principal Place of Business 160 107TH AVENUE TREASURE ISLAND, FL 33706	Mailing Address 160 107TH AVENUE TREASURE ISLAND, FL 33706
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DO NOT WRITE IN THIS SPACE

4. FEI Number 68-0556723	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ORZECZOWSKI, RON 160 107TH AVENUE TREASURE ISLAND, FL 33706
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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

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

U00000798689
01/20/08-20038-009 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ORZECZOWSKI, RITA 160-107TH AVE TREASURE ISLAND, FL 33706
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Rita Orzechowski*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/18/08 *727-363-3699*
Date Daytime Phone #