

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024469

FILED
Apr 21, 2009
Secretary of State

Entity Name: MCCABE-PARDI ENTERPRISES, L.L.C.

Current Principal Place of Business:

1518 E. PARK STREET N.
ST. PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

1518 E. PARK STREET N.
ST. PETERSBURG, FL 33710

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCABE, DAWN R
1518 E. PARK STREET N.
ST. PETERSBURG, FL 33710 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/MANAGERS:

Title: MGR () Delete
Name: MCCABE, DAVID J
Address: 1518 E. PARK STREET N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: MGR () Delete
Name: MCCABE, DAWN R
Address: 1518 E. PARK STREET N.
City-St-Zip: ST. PETERSBURG, FL 33710

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DAVID J MCCABE

DJM

04/21/2009

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