

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 01, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000025443

1. Entity Name
L & S REALTY GROUP, LLC



Principal Place of Business
**728 CENTERWOOD DRIVE
TARPON SPRINGS, FL 34688 US**

Mailing Address
**728 CENTERWOOD DRIVE
TARPON SPRINGS, FL 34688 US**



01112005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
03-0523037

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**COLEMAN, C. RANDOLPH
9250 BAYMEADOWS ROAD
450
JACKSONVILLE, FL 32256**

**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**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
BAKER, GLENN
728 CENTERWOOD DRIVE
TARPON SPRINGS, FL 34688**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
RICHARDSON, LINDON
27947 ARLINGTON ROAD
WEST CHAPEL, FL 33544**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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NAME
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STREET ADDRESS
CITY- ST- ZIP

U00000283908
04/01/05-80047-004 50.00

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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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/7/05 (813)390-5589

Date

Daytime Phone #