## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000025889

Entity Name: CHROME SPINNERS, LLC

**FILED** Mar 09, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

813 CARMAGO WAY 550 VIA DEL ORO STE 204

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 150181

ALTAMONTE SPRINGS, FL 32715 US

FEI Number: 56-2378784 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOBIAS, BYRON 550 VIA DEL ORO ALTAMONTE SPRINGS, FL 32714

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:

Name:

Electronic Signature of Registered Agent Date

Name:

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

US

MGRM Title: () Change () Addition () Delete TOBIAS, BYRON

Address: 550 VIA DEL ORO Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

Name: STEPHENS, JASON Name: Address: 813 CARMAGO WAY Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BYRON TOBIAS **MGRM** 03/09/2005