

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029376

Entity Name: FERNCRAFT, LLC

FILED  
Mar 08, 2007  
Secretary of State

## Current Principal Place of Business:

% SNYDER FINANCIAL GROUP  
705 WEST AZEELE  
TAMPA, FL 33609

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1344  
TAMPA, FL 336011344

## New Mailing Address:

FEI Number: 37-1478073

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORMAN, CHRISTOPHER H  
315 S. HYDE PARK AVENUE  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

JONES, DON  
97 W. BISCAYNE AVE  
TAMPA, FL 33606 US

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: DON JONES

03/08/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: JOHNSON, JAMES  
Address: 5005 S SUNSET BLVD.  
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete  
Name: SNYDER, BRUCE  
Address: 705 W AZEELE  
City-St-Zip: TAMPA, FL 33609

Title: MGR ( ) Delete  
Name: WHITTINGTON, MARK  
Address: 2618 W SUNSET DRIVE  
City-St-Zip: TAMPA, FL 33629

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

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

Title: S (X) Change ( ) Addition  
Name: JONES, DON  
Address: 97 W. BISCAYNE AVE  
City-St-Zip: TAMPA, FL 33606

Title: T ( ) Change (X) Addition  
Name: SIVARD, FRANCIS J  
Address: 97 W. BISCAYNE AVE  
City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the 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: FRANCIS J. SIVARD

T

03/08/2007

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