

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000032710

1. Entity Name
POLLOCK & LIJEWSKI, LLC



Principal Place of Business
25 CAUSEWAY BLVD.
SUITE 32
CLEARWATER, FL 33767 US

Mailing Address
PO BOX 3025
CLEARWATER, FL 33767 US



01162005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
05-0585183

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLLOCK, CHARLES J
25 CAUSEWAY BLVD.
SUITE 32
CLEARWATER, FL 33767

**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 Charles J. Polluck

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-11-05

Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
MGR
LIJEWSKI, ALEXANDER
STREET ADDRESS
25 CAUSEWAY BLVD.
CITY-ST-ZIP
CLEARWATER, FL 33767

TITLE
NAME
MGR
POLLOCK, CHARLES J
STREET ADDRESS
25 CAUSEWAY BLVD.
CITY-ST-ZIP
CLEARWATER, FL 33767

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NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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02716705-800688-004 50.00

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]

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

Feb. 11, 2005 727-446-672

Date

Daytime Phone #