

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039069

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: MERRICK PERMITS, LLC

**Current Principal Place of Business:**

ATTN; CHARLENE MERRICK  
8067 34TH AVE. N.  
ST. PETERSBURG, FL 33710

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN; CHARLENE MERRICK  
8067 34TH AVE. N.  
ST. PETERSBURG, FL 33710

**New Mailing Address:**

FEI Number: 20-0172757      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MERRICK, CHARLENE M  
8067 34TH AVE. N.  
ST. PETERSBURG, FL 33710

**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/MEMBERS:**

Title: MGR ( ) Delete  
Name: MERRICK, CHARLENE M  
Address: 8067 34TH AVE. N  
City-St-Zip: ST. PETERSBURG, FL 33710

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: CHARLENE M MERRICK      MGR      01/05/2004

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