

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000039194

1. Entity Name
FLORIDA IDEAL(USA), LLC



Principal Place of Business
**420 MONTANA AVE
DAVENPORT, FL 33897**

Mailing Address
**420 MONTANA AVE
DAVENPORT, FL 33897**



04232007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1696947

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

8. Name and Address of Current Registered Agent

**BUCKLEY, PATRICIA A
420 MONTANA AVENUE
DAVENPORT, FL 33897**

**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, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	M
NAME	BUCKLEY, STUART
STREET ADDRESS	420 MONTANA AVENUE
CITY-ST-ZIP	DAVENPORT, FL 33897
TITLE	MM
NAME	BUCKLEY, PATRICIA A
STREET ADDRESS	420 MONTANA AVENUE
CITY-ST-ZIP	DAVENPORT, FL 33897
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *P.A. Buckley*

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

04-27-2007

Date

1 800 892 0957

Daytime Phone #