


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90497 039 ****50.00

DOCUMENT # L03000044753	
1. Entity Name HAPPY FLYER, LLC	

Principal Place of Business 4050 SELVITZ ROAD FORT PIERCE, FL 34981	Mailing Address 4050 SELVITZ ROAD FORT PIERCE, FL 34981
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24034462



2. Principal Place of Business AS ABOVE	3. Mailing Address IN ABOVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

01062004 Chg-LLC CR2E083 (10/03)

City & State	City & State
Zip	Country

4. FEI Number 51-0499875	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
GREENE, RICHARD 4050 SELVITZ ROAD FORT PIERCE, FL 34981

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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] (NOTE: Registered Agent signature required when reinstating) DATE: _____

Filing Fee is \$50.00 Due by May 1, 2004	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HI-TIDE SALES, INC. 4050 SELVITZ ROAD FORT PIERCE, FL 34981 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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] **Richard R. Greene, Pres.** 3/22/04 772-461-4660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #