## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045765

Entity Name: LUSCIER INSPECTIONS, LLC.

**FILED** Apr 23, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3747 NW 66TH PLACE 1375 SW 90TH STREET GAINESVILLE, FL 32653 GAINESVILLE, FL 32607

**Current Mailing Address: New Mailing Address:** 

3747 NW 66TH PLACE 1375 SW 90TH STREET GAINESVILLE, FL 32653 GAINESVILLE, FL 32607

FEI Number: 20-0436655 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GUY, CINDI L GUY, CINDI L 1375 SW 90TH STREET 3747 NW 66TH PLACE

US US GAINESVILLE, FL 32653 GAINESVILLE, FL 32607

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: CINDI GUY 04/23/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete (X) Change ( ) Addition

GUY, CINDI L GUY, CINDI L Name: Name: Address: 3747 NW 66TH PLACE Address: 1375 SW 90TH STREET City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32607

Title: MGR () Delete Title: () Change () Addition

Name: LUSCIER, MATTHEW T Name: Address: 5207 SE 108TH PLACE Address: City-St-Zip: BELLEVIEW, FL 34420 City-St-Zip:

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: CINDI GUY 04/23/2007