


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 11, 2005 8:00 am**  
**Secretary of State**

03-11-2005 90056 038 \*\*\*\*\*55.00

<b>DOCUMENT # L03000047867</b> 1. Entity Name <b>AARON CRANDALL PLUBMING, LLC</b>					
Principal Place of Business <b>136 BULLDOG DRIVE PALM COAST, FL 32110</b>			Mailing Address <b>1519 S. DAYTONA AVENUE FLAGLER BEACH, FL 32136</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>CRANDALL, AARON J 1519 S. DAYTONA AVENUE FLAGLER BEACH, FL 32136</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ (NOTE: Registered Agent signature required when reissuing) _____ DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>			<b>Make check payable to Florida Department of State</b>		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
			<b>Mgr AARON JOSHUA CRANDALL 1519 S DAYTONA AVENUE FLAGLER BEACH, FL 32136</b>		
			<b>Mgr MICHAELA ANNE CRANDALL 1519 S DAYTONA AVENUE FLAGLER BEACH, FL 32136</b>		
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.					
<b>SIGNATURE: <u>Michaela Crandall</u> Michaela Crandall 3/7/05 386-439-2427</b>					