

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000049545

**FILED**  
**Apr 13, 2005**  
**Secretary of State**

**Entity Name:** CHRIS ASTOSKE FLOORING, LLC

**Current Principal Place of Business:**

2301 ROCK SPRINGS DR  
PORT ST LUCIE, FL 34952

**New Principal Place of Business:**

3055 SE FARLEY RD  
PORT ST LUCIE, FL 34952

**Current Mailing Address:**

2301 ROCK SPRINGS DR  
PORT ST LUCIE, FL 34952

**New Mailing Address:**

3055 SE FARLEY RD  
PORT ST LUCIE, FL 34952

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

BRECHBILL, MARK  
215 SOUTH FEDERAL HWY, STE 100  
STUART, FL 34994 US

**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: ASTOSKE, CHRIS  
Address: 2301 ROCK SPRINGS DR  
City-St-Zip: PORT ST LUCIE, FL 34952

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ASTOSKE, CHRIS  
Address: 3055 SE FARLEY RD  
City-St-Zip: PORT ST LUCIE, FL 34952

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: CHRIS ASTOSKE

MGR

04/13/2005

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