


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000052792

1. Entity Name
GEORGE STRATFORD RESCREENING, LLC



Principal Place of Business: **3724 EASY STREET
 PORT CHARLOTTE, FL 33952**

Mailing Address: **PO BOX 380611
 MURDOCK, FL 33938**

DO NOT WRITE IN THIS SPACE



01102005No Chg-LLC CR2E083 (10/03)

4. FEI Number 81-0647780	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**STRATFORD, GEORGE T JR
 3724 EASY STREET
 PORT CHARLOTTE, FL 33952**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2005**

01/14/05-80008-007 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STRATFORD, GEORGE T JR PO BOX 380611 MURDOCK, FL 33938
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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)(f), 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: *X George T Stratford Jr* **Date:** *1-14-05* **Daytime Phone #:** *941-380-7988*

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