

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Jun 17, 2004 8:00 am
Secretary of State

04-30-2004 90077 010 ****50.00

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02182004 Chg-LLC CR2E083 (10/03)

DOCUMENT # L03000053253 1. Entity Name BILL VANBURGER WOODWORKING, LLC					
Principal Place of Business 1133 36TH AVE SW VERO BEACH, FL 32962			Mailing Address 1133 36TH AVE SW VERO BEACH, FL 32962		
2. Principal Place of Business 885 35 CT. S.W. Suite, Apt. #, etc.		3. Mailing Address 1133 36TH AVE S.W. Suite, Apt. #, etc.			
City & State VERO BEACH FL		City & State VERO BEACH FL		4. FEI Number 650053556	
Zip 32968		Country		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent VANBURGER, WILLIAM 1133 36TH AVE SW VERO BEACH, FL 32962				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 <u>Bill Van Burger</u> DATE <u>3-24-04</u> 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, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM VANBURGER, WILLIAM 1133 36TH AVE SW VERO BEACH, FL 32962		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: <u>Bill Van Burger</u> <u>BILL VAN BURGER</u> <u>3-24-04</u> <u>772-562-0690</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					