

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90045 005 ****50.00

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DOCUMENT # L04000016629 1. Entity Name UNITOYS COMPANY, LLC					
Principal Place of Business BOX 336 5409 OVERSEAS HWY MARATHON, FL 33050 US			Mailing Address BOX 336 5409 OVERSEAS HWY MARATHON, FL 33050 US		
2. Principal Place of Business 8668 Navarre Pkwy Suite, Apt. #, etc. #150		3. Mailing Address 8668 Navarre Pkwy Suite, Apt. #, etc. #150		04282005 Chg-LLC CR2E083 (10/03)	
City & State Navarre, FL		City & State Navarre FL		4. FEI Number 20-0808885	
Zip 32566		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent PETTIT, MICHAEL 113 GULF WIND LANE MARATHON, FL 33050				7. Name and Address of New Registered Agent Name Michael Pettit Street Address (P.O. Box Number is Not Acceptable) 8668 Navarre Pkwy #150 City Navarre FL Zip Code 32566	
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>Michael D Pettit</u> DATE <u>5/1/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PETTIT, MICHAEL BOX 336 5409 OVERSEAS HWY MARATHON, FL 33050	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PETTIT, MICHAEL BOX 336 5409 OVERSEAS HWY MARATHON, FL 33050	<input type="checkbox"/> Delete			
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>Michael D Pettit</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				DATE: <u>5/1/05</u> <small>Daytime Phone #</small>	