2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 13, 2005 8:00 am Secretary of State

DOCUMENT # L04000021280 1. Entity Name INDEPENDENT STUCCO LLC							04-13-2005 9	0220 018 ****5	0.00
Principal Plac	e of Rusines	· · · · · · · · · · · · · · · · · · ·	Mailing Address	<u>-</u>					
2720 KNOLI EUSTIS, FL	LWOOD TR	•	2720 KNOLLWOOD TR EUSTIS, FL 32726				67 0 67 810 38 TIM		
2. Principal Place of Business			3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01042005	Chg-LLC	CR2E083 (10/03)			
City & State		City & State		4. FEI Number 5 4	-214810	S A	pplied For ot Applicable		
Zip		Country	Zip	Coun	ntry		of Status Desired	□ \$5.00 Ad Fee Require	
	6. Name	e and Address of Current R	Registered Agent		Nama	7. Name and	Address of New Re	gistered Agent	
SQUITIERI, TOM 2720 KNOLLWOOD TR EUSTIS, FL 32726			Street Address		(P.O. Box Number is Not Acceptable)				
					City			FL Zip Coo	de
	named entil tions of regis	ty submits this statement for stered agent.	the purpose of changing its	register	ed office or regist	tered agent, or bo	th, in the State of Flo	rida. I am lamiliar with	, and accept
SIGNATURE	Signature, typed	d or printed name of registered agent ar	nd title if applicable. (NOTE	E: Registere	ed Agent signature requi	red when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2005									
F	iling Fee ue by Ma	is \$50.00 y 1, 2005						check payable to Department of Sta	te
	iling Fee ue by Ma						Florida	Department of Sta	te
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SQUITIEI 2720 KNO	MANAGING MEMBER	 S/MANAGERS ☐ Delete	10. TITU NAM STRE	E			Department of Sta	de ☐ Addition
9. TITLE NAME STREET ADDRESS	MGR SQUITIEI 2720 KNO	MANAGING MEMBER	RS/MANAGERS	10. TITU NAM STRE CITY TITU NAM STRE	E EET ADORESS '-ST-ZIP E		Florida	Department of Star	
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RE: DOWN OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE