

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 18, 2005 8:00 am
Secretary of State

03-03-2005 90026 016 ****50.00

DOCUMENT # L04000034919					
1. Entity Name FULCRUM TRADING, LLC					
Principal Place of Business 325 LOS PRADOS DRIVE SAFETY HARBOR, FL 34695			Mailing Address 325 LOS PRADOS DRIVE SAFETY HARBOR, FL 34695		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 254390			Applied For ☒ Not Applicable		
5. Certificate of Status Desired ☐			5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CALDWELL, HARRY E JR. 325 LOS PRADOS DRIVE SAFETY HARBOR, FL 34695			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 _____ DATE _____ (Signature, hand or printed name of registered agent with title if applicable. (NOTE: Registered Agents signature required when renewing))					
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 CALDWELL, HARRY E JR 325 LOS PRADOS DRIVE SAFETY HARBOR, FL 34695 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
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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)(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: 		2-28-05 (727) 799-0625			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date			

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