

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90124 009 ****55.00

DOCUMENT # L04000044095 1. Entity Name RIVER ROAD PARKING, LLC					
Principal Place of Business 38208 RIVER ROAD DADE CITY, FL 33525			Mailing Address 15535 JOHN MCCARTHY ROAD DADE CITY, FL 33523		
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 61-1471713	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WALLER, CHARLES D ESQ. POST OFFICE BOX 1668 37927 LIVE OAK AVE DADE CITY, FL 33523				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</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	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
			MGRM Hayes Warren Stevens 15535 John McCarthy Rd. Dade City, FL 33523		
			Member Arlene M. Stevens 15535 John McCarthy Road Dade City, FL 33523		
			Member Larry Stanley Bryant 8746 Morash Street Zephyrhills, FL 33540		
			Member Thomas K. McCarthy 15941 John McCarthy Road Dade City, FL 33523		
			Member Richard L. Gordon 31024 St. Joe Rd. Dade City, FL 33525		
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: <i>Hayes Warren Stevens</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> Hayes Warren Stevens			Date: 4/21/05 Daytime Phone #: 352-588-2947		