

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047780

Entity Name: LOC-N-STOR, LLC

FILED  
Apr 20, 2005  
Secretary of State

**Current Principal Place of Business:**

789 MIRACLE STRIP PARKWAY  
EAST MARY ESTHER, FL 32569

**New Principal Place of Business:**

**Current Mailing Address:**

789 MIRACLE STRIP PARKWAY  
EAST MARY ESTHER, FL 32569

**New Mailing Address:**

FEI Number: 20-1483812

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WILLARD, GEORGE A  
789 MIRACLE STRIP PARKWAY  
EAST MARY ESTHER, FL 32569 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: WILLARD, GEORGE A MR  
Address: 789 MIRACLE STRIP PKWY. EAST  
City-St-Zip: MARY ESTHER, FL 32569 US

Title: MGRM ( ) Change (X) Addition  
Name: WILLARD, BARBARA J MS  
Address: 789 MIRACLE STRIP PKWY EAST  
City-St-Zip: MARY ESTHER, FL 32569

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: GEORGE A. WILLARD

MGR

04/20/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date