## **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## **DOCUMENT # L04000053925**

SPECTRUM ENGINEERING & DESIGN, PLC



Principal Place of Business

Mailing Address

5924 SPRING LAKE DR. LAKELAND, FL 33811 US 5924 SPRING LAKE DR. LAKELAND, FL 33811 US

**FILED** Jan 19, 2007 8:00 am Secretary of State

01-19-2007 90061 023 \*\*\*\*50.00

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01102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5,00 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

MEIER, NORMAN I 5924.SPRING.LAKE DR. LAKELAND, FL 33811

DO					
IN	Th	115	SF	<b>PA</b> (	CE

the obligations of registered agent.					
SIGNATURE					
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
	Filing Fee is \$50.00 Due by May 1, 2007				

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

<i>a.</i>	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	MEIER, NORMAN I		
STREET ADDRESS	5924 SPRING LAKE DR.		
CITY-ST-ZIP	LAKELAND, FL 33811		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
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TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filling does not qualify for the			

DO NOT WRITE IN THIS SPACE

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

STAUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER

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