

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056213

FILED
Sep 15, 2006
Secretary of State

Entity Name: PLOCHARCZYK INTERESTS LLC

Current Principal Place of Business:

5007 RIPPLE RUSH DRIVE, NORTH
JACKSONVILLE, FL 322574759 US

New Principal Place of Business:

Current Mailing Address:

5007 RIPPLE RUSH DRIVE, NORTH
JACKSONVILLE, FL 322574759 US

New Mailing Address:

FEI Number: 20-1535176 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PLOCHARCZYK, THOMAS J
5007 RIPPLE RUSH DRIVE, NORTH
JACKSONVILLE, FL 322574759 US

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/MANAGERS:

Title: MGRM () Delete
Name: PLOCHARCZYK, THOMAS J
Address: 5007 RIPPLE RUSH DRIVE, NORTH
City-St-Zip: JACKSONVILLE, FL 322574759 US

Title: MGRM () Delete
Name: PLOCHARCZYK, LEONARD P JR.
Address: 13484 CHESTNUT STREET
City-St-Zip: SOUTHGATE, MI 48195

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: THOMAS J. PLOCHARCZYK

MGRM

09/15/2006

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