

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

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

05-02-2005 90094 044 ****50.00

DOCUMENT # L04000072470

1. Entity Name

CHARO BUILDERS LLC



Principal Place of Business

1695 BULEVAR MAYOR
PENSACOLA BEACH FL 32561

Mailing Address

356 FAIRFIELD AVE.
GRETNA LA 70056



2. Principal Place of Business

1695 Bulevar Mayor
Suite, Apt. #, etc.

3. Mailing Address

356 Fairfield Ave
Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/04)

City & State

Pensacola Beach FL

City & State

Gretna La

4. FEI Number

56-2483359

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROTENBERRY, RODNEY C
1695 BULEVAR MAYOR
PENSACOLA BEACH FL 32561

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ROTENBERRY, RODNEY C
STREET ADDRESS 1695 BULEVAR MAYOR
CITY-ST-ZIP PENSACOLA BEACH FL 32561

☐ Delete

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10. ADDITIONS/CHANGES

TITLE
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #