

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 27, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000078659

1. Entity Name
DAVID HART SERVICES LLC



Principal Place of Business
**4992 TUCUMCARI TRAIL
SARASOTA, FL 34241**

Mailing Address
**4992 TUCUMCARI TRAIL
SARASOTA, FL 34241**



05092008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1854240

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HART, DAVID
4992 TUCUMCARI TRAIL
SARASOTA, FL 34241**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing)

DATE

**FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U00000952474
06/04/08-80080-016 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
MGRM
NAME
HART, DAVID
STREET ADDRESS
4992 TUCUMCARI TRAIL
CITY-ST-ZIP
SARASOTA, FL 34241

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing 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:

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

David Hart
Date: *April 29, 2008*
Daytime Phone #