

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90043 006 \*\*\*\*50.00

**DOCUMENT # L04000085352**

1. Entity Name  
VILLAGE FOOD SERVICES, LLC



Principal Place of Business  
10254 EAST COUNTY HIGHWAY 30A, UNIT 11E  
SEACREST BEACH, FL 32413

Mailing Address  
10254 EAST COUNTY HIGHWAY 30A, UNIT 11E  
SEACREST BEACH, FL 32413

**20039698**



2. Principal Place of Business

3. Mailing Address

04212006 Chg-LLC CR2E083 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-1942725

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FITZPATRICK, RAYMOND P JR.  
10254 EAST COUNTY HIGHWAY 30A, UNIT 11E  
SEACREST BEACH, FL 32413

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

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

**Make check payable to**  
**Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME CHAMBERS, STEVEN E  
STREET ADDRESS 10254 EAST COUNTY HIGHWAY 30A, UNIT 11E  
CITY-ST-ZIP SEACREST BEACH, FL 32413

TITLE MGRM ☒ Change ☐ Addition  
NAME Steven E. Chambers  
STREET ADDRESS 10254 E. Co. Hwy 30-A 16E  
CITY-ST-ZIP Seacrest Bch., FL 32413

TITLE MGR ☐ Delete  
NAME FITZPATRICK, RAYMOND P JR.  
STREET ADDRESS 10254 EAST COUNTY HIGHWAY 30A, UNIT 11E  
CITY-ST-ZIP SEACREST BEACH, FL 32413

TITLE MGRM ☒ Change ☐ Addition  
NAME Raymond P. Fitzpatrick, Jr.  
STREET ADDRESS 10254 E. Co. Hwy 30-A, 11E  
CITY-ST-ZIP Seacrest Bch., FL 32413

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/28/06

205-320-2255