

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 20, 2006 08:00 AM
Secretary of State**

DOCUMENT # L04000087380

1. Entity Name

FAST-TEKS OF MANATEE COUNTY, L.L.C.



Principal Place of Business

**3004 92ND AVENUE EAST
PARRISH, FL 34219**

Mailing Address

**3004 92ND AVENUE EAST
PARRISH, FL 34219**



01162006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1958515

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARTIN, JOHN P
401 SOUTH LINCOLN AVENUE
CLEARWATER, FL 33756**

**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 reinstating)

DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME BILODEAU, ERNEST
STREET ADDRESS 3004 92ND AVENUE EAST
CITY-ST-ZIP PARRISH, FL 34219

TITLE MGRM
NAME BILODEAU, DIANA L
STREET ADDRESS 3004 92ND AVENUE EAST
CITY-ST-ZIP PARRISH, FL 34219

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1000000393074
01/25/06-80006-007 \$0.00

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

Date

Daytime Phone #

Ernest Bilodeau 1/16/06