

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

05-01-2006 90077 011 ****50.00

DOCUMENT # L04000088662

1. Entity Name
CHAMBERLAINS IRON LLC



Principal Place of Business
**336 SOMERSET AVE.
SARASOTA, FL 34243**

Mailing Address
**336 SOMERSET AVE.
SARASOTA, FL 34243**

20041390



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04192006 Chg-LLC CR2E083 (11/05)

4. FEI Number

20-1979144

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

**CHAMBERLAIN, JOHN DUNCAN
336 SOMERSET AVE,
SARASOTA, FL 34243**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CHAMBERLAIN, JOHN DUNCAN
336 SOMERSET AVE.
SARASOTA, FL 34243** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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

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 #

4-25-06 **941 366-0920**

ATTACHMENT 20041390
#L04000088662

OWNERSHIP AFFIDAVIT

I, Duncan Chamberlain, do hereby affirm that I am a member of

Chamberlain's Iron LLC,

owning 100% interest in said LLC.

D Chamberlain

4-25-06
Date

To be completed by notary:

Duncan Chamberlain

Type/print name of applicant

NOTARY STATE OF FLORIDA, COUNTY OF Sarasota

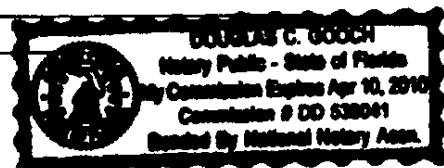
Sworn to and subscribed before me this 26 day of APRIL, 2006,
by Duncan Chamberlain

 Personally known to me

X Produced Identification / Type of Identification Produced FDL CS16 464 62 4500

Notary Signature: [Signature]

My Commission Expires: APRIL 10 2010



2005-06

THIS TAX DOES NOT ASSURE QUALITY OR WORK OR CONFIRM THAT REGULATORY OR ZONING REQUIREMENTS HAVE BEEN MET. IT IS THE OWNER'S RESPONSIBILITY TO ENSURE COMPLIANCE.

990010076112

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390814 WELDING REPAIRS

336 SOMMERSET AVE
SARASOTA FL 34243

PAID-6050488.0001-0001 97 08/17/2005 14.43

CHAMBERLAINS IRON LLC
336 SOMMERSET AVE
SARASOTA, FL 34243

ACTIVE

INFORMATION ONLY: REMOVE OR FOLD BEHIND BEFORE POSTING LICENSE

**THIS RECEIPT IS FURNISHED PURSUANT TO CHAPTER 205 LAWS OF FLORIDA
AND SARASOTA COUNTY ORDINANCE 91-084, AS AMENDED**

The law requires this receipt/license to be displayed conspicuously at the place of business so that it is open to the view of the public and available for inspection. Upon failure to do so, the business shall be subject to the payment of another full tax for the same business, profession or occupation.

Payment is due each year by September 30th. Payment after September 30th is delinquent and subject to a penalty of 10% for the month of October, plus an additional 5% penalty for each month thereafter. The total delinquency penalty shall not exceed 25% of the tax. A 25% penalty is imposed on any person engaged in any new business, occupation or profession without first paying a Sarasota County Occupational License Tax.

This receipt is an occupational tax only. It does not permit the person/business to violate any existing regulatory or zoning laws of the state, county, or cities, nor does it exempt the licensee from any other license or permits that may be required by law. This receipt/license does not assure quality of work.

All businesses in Sarasota County are responsible for complying with the Sarasota County mandatory recycling ordinance.

Occupational License Taxes are subject to change according to law.

ATTACHMENT

20041390

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