

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000093683

1. Entity Name
LLOYD'S AUTO RESTORATIONS, LLC



Principal Place of Business
338 BARTOW MUNICIPAL AIRPORT
BARTOW, FL 33830

Mailing Address
6139 DONEGAL EAST
LAKELAND, FL 33813



01042006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
34-2032899

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BREKKE, LLOYD B JR.
6139 DONEGAL EAST
LAKELAND, FL 33813

**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**

000000381857
01/11/06-80071-024 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BREKKE, LLOYD B JR
6139 DONEGAL EAST
LAKELAND, FL 33813

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BREKKE, JEFFREY L
2315 CIRCLE DRIVE
LAKELAND, FL 33803

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
BREKKE, JANICE M
6139 DONEGAL EAST
LAKELAND, FL 33813

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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

1/6/06

Date

803-533-3722

Daytime Phone #