

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 11, 2007**  
**Secretary of State**

DOCUMENT# L05000001559

**Entity Name:** RON'S TACKLE BOX, LLC

**Current Principal Place of Business:**

380 S LAKE SHORE WAY  
LAKE ALFRED, FL 33850

**New Principal Place of Business:**

**Current Mailing Address:**

380 S LAKE SHORE WAY  
LAKE ALFRED, FL 33850

**New Mailing Address:**

FEI Number: 20-2105439      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SCHELFO, RONALD E  
640 E. LAKE VIEW ROAD  
LAKE ALFRED, FL 33850      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SCHELFO, RONALD E  
Address: 640 E. LAKE VIEW ROAD  
City-St-Zip: LAKE ALFRED, FL 33850

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RONALD E. SCHELFO      MGR      04/11/2007

\_\_\_\_\_ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date