

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT****FILED**
May 04, 2007 08:00 A
Secretary of State**DOCUMENT # L05000004278**1. Entity Name
KOZZ FRAMING, LLC

Principal Place of Business

2347 SW JUNCTION RD.
FT. WHITE, FL 32038 US

Mailing Address

2347 SW JUNCTION RD.
FT. WHITE, FL 32038 US

05012007No Chg-LLC

CR2ED83 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-2180699

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

KOZIMOR, MICHAEL J
2347 SW JUNCTION RD.
FT. WHITE, FL 32038**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 renouncing)

5-01-07

DATE

Filing Fee is \$50.00
Due by May 1, 2007U000000760984
05/25/07-80038-001 50.009. **MANAGING MEMBERS/MANAGERS**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
KOZIMOR, MICHAEL J
2347 SW JUNCTION RD.
FT. WHITE, FL 32038TITLE
NAME
STREET ADDRESS
CITY- ST- ZIPTITLE
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NAME
STREET ADDRESS
CITY- ST- ZIP**DO NOT WRITE
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 606, Florida Statutes.

SIGNATURE:

5-01-07 609-402-1217

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone: