

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 A
Secretary of State

DOCUMENT # L05000007137

1. Entity Name
HERDEL & GREENWOOD, L.L.C.



Principal Place of Business
**845 SR 44
NEW SMYRNA BEACH, FL 32168**

Mailing Address
**845 SR 44
NEW SMYRNA BEACH, FL 32168**



01142008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2269869

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HERDEL, JENNIFER A
845 SR 44
NEW SMYRNA BEACH, FL 32168**

**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

Jennifer A. Herdel

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when rehashing)

1-14-08

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GREENWOOD, WILLIAM
STREET ADDRESS	2401 SEIDENBURG AVE.
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	MGRM
NAME	GREENWOOD, KATHLEEN
STREET ADDRESS	2401 SEIDENBURG AVE.
CITY-ST-ZIP	KEY WEST, FL 33040
TITLE	MGRM
NAME	HERDEL, G. FREDRICK
STREET ADDRESS	2821 OSPREY COVE DRIVE
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32168
TITLE	MGRM
NAME	HERDEL, JENNIFER A
STREET ADDRESS	2821 OSPREY COVE DRIVE
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32168
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000795894
01/29/08-90014-013 138.75

**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 608, Florida Statutes.

SIGNATURE:

Jennifer A. Herdel

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

1-14-08 (386)423-2550

Date

Daytime Phone #