


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000009821	
1. Entity Name S.R.D. L.L.C.	

Principal Place of Business 64 CHRISOPHER COURT PALM COAST, FL 32137	Mailing Address 64 CHRISOPHER COURT PALM COAST, FL 32137
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DO NOT WRITE IN THIS SPACE



04172007 No Chg-LLC	CR2E083 (11/05)
4. FEI Number 20-2654146	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CHIUMENTO, MICHAEL D
 4 OLD KINGS ROAD NORTH SUITE B
 PALM COAST, FL 32137

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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 _____ (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

1100000719425
 05/01/07-80062-024 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEVORE, ROBERT D 64 CHRISOPHER COURT PALM COAST, FL 32137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROCKETT, STUART C P O BOX 267 FLAGLER BEACH, FL 32136
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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: *Stuart C. Rockett* **STUART C. ROCKETT** *4/16/2007* **386-447-1903**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #