

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 12, 2007 8:00 am**  
**Secretary of State**

04-12-2007 90185 001 \*\*\*\*50.00

**DOCUMENT # L05000015347**

1. Entity Name  
**EVERETT REAL ESTATE HOLDINGS, LLC**



Principal Place of Business

**1103 HORATIO STREET  
TAMPA, FL 33606 US**

Mailing Address

**1103 HORATIO STREET  
TAMPA, FL 33606 US**

**DO NOT WRITE IN THIS SPACE**



04092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**OSINSKA-WINIAREK, GRAZYNA  
1103 HORATIO STREET  
TAMPA, FL 33606**

**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, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	OSINSKA-WINIAREK, GRAZYNA
STREET ADDRESS	1103 HORATIO STREET
CITY-ST-ZIP	TAMPA, FL 33606
TITLE	MGRM
NAME	WINIAREK, WOJCIECH
STREET ADDRESS	1103 HORATIO STREET
CITY-ST-ZIP	TAMPA, FL 33606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
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 608, Florida Statutes.

**SIGNATURE:**

*Winiarek*

**GRAZYNA OSINSKA-WINIAREK  
PRES.**

**4/09/07**

**813-254-0804**

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

Date

Daytime Phone #