

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90361 019 \*\*\*\*50.00

<b>DOCUMENT # L05000021406</b> 1. Entity Name <b>GRAZIN' MOOSE MARKET, LLC</b>					
Principal Place of Business 111 RIO VILLA DRIVE PUNTA GORDA, FL 33950			Mailing Address 111 RIO VILLA DRIVE PUNTA GORDA, FL 33950		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>20-2442800</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145				Name <b>MARY L. HAJNEY</b> Street Address (P.O. Box Number is Not Acceptable) <b>111 RIO VILLA DR.</b> City <b>PUNTA GORDA</b> <b>FL</b> Zip Code <b>33950</b>	
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 <u><i>Mary L. Hajney</i></u> DATE <u>4/27/07</u> <small>Signature, typed or printed name of registered agent is valid if none above. (NOTE: Registered Agent signature required when constituting)</small>					
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2007</b>			<b>Make check payable to</b> <b>Florida Department of State</b>		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>MGR</b> <b>HAJNEY, MARY L</b> <b>111 RIO VILLA DR</b> <b>PUNTA GORDA, FL 33950</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>MGR</b> <b>HAJNEY, MICHAEL J</b> <b>111 RIO VILLA DR</b> <b>PUNTA GORDA, FL 33950</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>S</b> <b>HAJNEY, MICHAEL J</b> <b>111 RIO VILLA DR</b> <b>PUNTA GORDA, FL 33950</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>T</b> <b>HAJNEY, MARY L</b> <b>111 RIO VILLA DR</b> <b>PUNTA GORDA, FL 33950</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: <u><i>Mary L. Hajney</i></u> <b>MARY L. HAJNEY</b> <u>4/27/07</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					