

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000023405**

1. Entity Name  
**IRON HORSE TOURING, LLC**



Principal Place of Business

**2105 MARSH ROAD  
DELAND, FL 32724 US**

Mailing Address

**2105 MARSH ROAD  
DELAND, FL 32724 US**

**DO NOT WRITE IN THIS SPACE**



01312007No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
**20-2450900**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

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

**KIERZYNSKI & ASSOCIATES  
5143 COMMERCIAL WAY  
SPRING HILL, FL 34606**

**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	MGR
NAME	STOFFAN, JEFFREY
STREET ADDRESS	2105 MARSH ROAD
CITY-ST-ZIP	DELAND, FL 32724
TITLE	MGR
NAME	BLAIR, DONALD
STREET ADDRESS	13450 TAFT STREET
CITY-ST-ZIP	BROOKSVILLE, FL 34613
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000757135  
05/23/07-80059-009 50.00

**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:**

*X Donald Blair*

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

**X 4/15/2007**

Date

Daytime Phone #