

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 05, 2008 8:00 am
Secretary of State

04-28-2008 90039 005 ***138.75

30008827



DOCUMENT # L05000044770 1. Entity Name HUNTIN' FOR A BARGAIN CONSIGNMENT SHOP LLC					
Principal Place of Business 3007 MAIN STREET 2852 Church St. VERNON, FL 32462				Mailing Address 3007 MAIN STREET 2852 Church St. VERNON, FL 32462	
2. Principal Place of Business - No P.O. Box # 2852 Church St		3. Mailing Address Suite, Apt. #, etc.			
City & State Vernon, FL		City & State Suite, Apt. #, etc.			
Zip 32462		Country USA		4. FEI Number 51-0545925	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent KATZ, ALLEN H 2800 EAST COMMERCIAL BLVD STE 208 FT. LAUDERDALE, FL 33308				7. Name and Address of New Registered Agent Name Marilyn White Street Address (P.O. Box Number is Not Acceptable) 3024 Firefly Lane City Vernon, FL Zip Code 32462	
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>Marilyn White</u> DATE <u>6/3/08</u> (NOTE: Registered Agent signature required when transferring)					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HASKINS, DENISE M 3007 MAIN STREET VERNON, FL 33462	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HASKINS, DAVID S 3007 MAIN STREET VERNON, FL 33462	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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: <u>Denise Haskins</u> DATE: <u>3/25/08</u> SIGNATURE AND TYPE OR PRINTED NAME OF FILING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					