

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

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DOCUMENT # L05000050896

1. Entity Name
FAD, L.L.C.



Principal Place of Business
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

Mailing Address
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

FILED
07 APR 26 PM 3:45

CLERK OF STATE
TALLAHASSEE, FLORIDA



03282007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
20-2840550

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CANNON, JOHN
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

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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
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
CANNON, JOHN
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BAUMAN, ROBB A
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BAUMAN, RONALD T
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BAUMAN, MICHAEL C
201-34TH STREET NORTH
ST. PETERSBURG, FL 33713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4/5/9

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05/22/07--01021--009 **300.00

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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: _____

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

Date

Daytime Phone #

4-5-07 727-327-9026