

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 14, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000061149

1. Entity Name
4 GREAT GUYS, LLC



Principal Place of Business

**5350 PINE SHADOW LANE
NORTH PORT, FL 34287**

Mailing Address

**5350 PINE SHADOW LANE
NORTH PORT, FL 34287**



01052008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0801396

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BERGHOFF, RONALD E
5350 PINE SHADOW LANE
NORTH PORT, FL 34287**

**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

Ronald E. Berghoff

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

1-10-08

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U000000782109
01/15/08-80061-016 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	POULIN, GERALD
STREET ADDRESS	5681 WHISPERING OAKS DRIVE
CITY-ST-ZIP	NORTH PORT, FL 34287
TITLE	MGRM
NAME	BERGHOFF, RON
STREET ADDRESS	5350 PINE SHADOW LAND
CITY-ST-ZIP	NORTH PORT, FL 34287
TITLE	MGRM
NAME	PALUMBO, WILLIAM
STREET ADDRESS	5241 PINE SHADOW LANE
CITY-ST-ZIP	NORTH PORT, FL 34287
TITLE	MGRM
NAME	HETHERINGTON, RAY
STREET ADDRESS	5241 PINE SHADOW LANE
CITY-ST-ZIP	NORTH PORT, FL 34287
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:

Ronald E. Berghoff

RONALD E. BERGHOFF

1-10-08

(941) 423-3083

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

Date

Daytime Phone #