

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 04, 2008 08:00 A
Secretary of State

DOCUMENT # L05000073238

1. Entity Name
MANUFACTURERS DIRECT, LLC



Principal Place of Business
P.O. BOX 17445
CLEARWATER, FL 33762

Mailing Address
P.O. BOX 17445
CLEARWATER, FL 33762



01312008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4704826

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIVITO, JOSEPH A ESQ.
C/O DIVITO & HIGHAM, P.A.
4514 CENTRAL AVE.
ST. PETERSBURG, FL 33711

**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 _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	EDDINS, SHIRLEY A
STREET ADDRESS	P.O. BOX 17445
CITY-ST-ZIP	CLEARWATER, FL 33762

TITLE	
NAME	
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CITY-ST-ZIP	

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U000000815412
02/14/08-80008-009 138.75

**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.

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1/31/2008

727-510-6039