

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000081478

1. Entity Name
PANOS FAMILY L.L.C.



Principal Place of Business
**3101 S.R. 580
SAFETY HARBOR, FL 34695 US**

Mailing Address
**3101 S.R. 580
SAFETY HARBOR, FL 34695 US**



02072008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3414892

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PANOS, NICK G OWNER
3101 S.R. 580
SAFETY HARBOR, FL 34695**

**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**

000000854066
03/26/08-80095-002 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PANOS, GREGORY
STREET ADDRESS	425 REGINA LANE
CITY-STATE-ZIP	RICHMOND, VA 23238
TITLE	MGRM
NAME	PANOS, KITSIA
STREET ADDRESS	425 REGINA LANE
CITY-STATE-ZIP	RICHMOND, VA 23238
TITLE	MGRM
NAME	PANOS, NICHOLAS
STREET ADDRESS	3101 S.R. 580
CITY-STATE-ZIP	SAFETY HARBOR, FL 34695
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-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: _____

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

Nicholas Panos
NICHOLAS PANOS
MGRM

3/7/08

Date

Daytime Phone #

282-797-2667