# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### **DOCUMENT # L05000093868** 1. Entity Name A&D UNLIMITED, LLC Principal Place of Business Mailing Address 25 WHITE MARSH LANE 25 WHITE MARSH LANE ROTONDA WEST, FL 33947 ROTONDA WEST, FL 33947

#### **FILED** Feb 21, 2008 08:00 Al Secretary of State



## DO NOT WRITE IN THIS SPACE

01262008No Chg-LLC CR2E083 (12/07)

4. FEI Number Applied For 20-3544865 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

ADAMS, BRUCE 25 WHITE MARSH LANE **ROTONDA WEST, FL 33947** 

the obligations of registered agent.

### DO NOT WRITE IN THIS SPACE

SIGNATURE				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	OATE	
	! NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE 3 / NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADAMS, BRUCE 25 WHITE MARSH LANE ROTONDA WEST, FL 33947			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00000833670 02/28/08-80022-012 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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.				

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