


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

02-09-2006 90153 026 \*\*\*\*50.00

<b>DOCUMENT # L05000109055</b> 1. Entity Name <b>CROWDER HARDWARE, LLC</b>					
Principal Place of Business <b>12480 SPRING HILL DRIVE SPRING HILL FL 34605 US</b>			Mailing Address <b>12480 SPRING HILL DRIVE SPRING HILL FL 34605 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>BLALOCK, WALTERS, HELD &amp; JOHNSON, P.A. 802 11TH STREET WEST BRADENTON FL 34205-7734</b>				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				<div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ (NOTE: Registered Agent signature required when resigning) _____ DATE _____					
<b>FILE NOW!!! FEE IS \$50.00</b> <b>Make Check Payable to Florida Department of State</b> <b>Due By May 1, 2006</b>					
<div style="display: flex;"> <div style="flex: 1;"> <b>9. MANAGING MEMBERS/MANAGERS</b> </div> <div style="flex: 1;"> <b>10. ADDITIONS/CHANGES</b> </div> </div>					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM CROWDER, JUSTIN C</b> <input type="checkbox"/> Delete <b>12480 SPRING HILL DRIVE</b> <b>SPRING HILL FL 34605</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>SIGNATURE:</b> <i>Justin Crowder</i>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> </div> <div style="width: 20%;"> <b>1-25-06</b>  <small>Date</small> </div> <div style="width: 40%;"> <b>352 686 4743</b>  <small>Daytime Phone #</small> </div> </div>					



ATTACHMENT  
30001749

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2006

CROWDER HARDWARE, LLC  
12480 SPRING HILL DRIVE  
SPRING HILL, FL 34605 US

Subject: **CROWDER HARDWARE, LLC**

Reference Number: **L05000109055**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/JE  
ANNUAL REPORTS SECTION