### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L05000123113**

US

1. Entity Name NOOK & TRANNY, LLC



01-10-2007 90060 012 \*\*\*\*50.00

**FILED** 

Jan 10, 2007 8:00 am Secretary of State

Principal Place of Business

947 NW 127TH AVENUE CORAL SPRINGS, FL 33071 Mailing Address

947 NW 127TH AVENUE CORAL SPRINGS, FL 33071

US



01062007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 13-4318970 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301

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TALLERINA	5000, 10 02001	IN THIS	SPACE
	named entity submits this statement for the purpose of challions of registered agent.	anging its registered office or registered agent, or both, in the Sta	tle of Florida. I am familiar with, and accept
SIGNATURE_			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	Iling Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	ZORN, BRENT S		
STREET ADDRESS	947 NW 127TH AVENUE		
CITY-ST-ZIP	CORAL SPRINGS, FL 33071		
TITLE			
NAME			

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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:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

RE: BNH M

1/6/0

954-651-4918

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

Date

Daytime Phone #