

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Apr 04, 2007 8:00 am**  
**Secretary of State**

04-04-2007 90039 043 \*\*\*\*50.00

DOCUMENT # L06000000509

1. Entity Name

CANTERBURY LLC



Principal Place of Business

Mailing Address

1135 PASADENA AVENUE SOUTH #208  
SOUTH PASADENA FL 33707  
US

1135 PASADENA AVENUE SOUTH #208  
SOUTH PASADENA FL 33707  
US

2. Principal Place of Business - No P.O. Box #

AS ABOVE

3. Mailing Address

AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

16-1747937

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

1st MOORE

CR2E083 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREADING, KEITH  
1135 PASADENA AVENUE SOUTH #208  
SOUTH PASADENA FL 33707

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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]*  
Signature, typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent signature required when reappointing)

KEITH J BREADING

03-16-07

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
MGRM  
BREADING, KEITH  
STREET ADDRESS  
1135 PASADENA AVENUE SOUTH #208  
CITY - ST - ZIP  
SOUTH PASADENA FL 33707 ☒ Delete

TITLE  
NAME  
MANAGING MEMBER  
W & BREADING & SON FL, INC  
STREET ADDRESS  
1135 PASADENA AVE S #208  
CITY - ST - ZIP  
S PASADENA FL 33707 ☐ Change ☐ Addition

TITLE  
NAME  
MGRM  
BREADING, LENA  
STREET ADDRESS  
1135 PASADENA AVENUE SOUTH #208  
CITY - ST - ZIP  
SOUTH PASADENA FL 33707 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE  
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CITY - ST - ZIP ☐ Delete

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CITY - ST - ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP ☐ Change ☐ 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.

SIGNATURE:

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

KEITH JAMES BREADING 03-16-07 7277435727

Date

Daytime Phone #