2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Aug 21, 2007 8:00 am Secretary of State 08-06-2007 90056 019 \*\*\*\*50.00 DOCUMENT # L06000022456 1. Entity Name S&D ENTERPRISES OF TAMPA BAY, LLC Principal Place of Business Mailing Address 30012455 1712 JILLIAN ROAD BRANDON FL 33510 1712 JILLIAN ROAD BRANDON FL 33510 2. Principal Place of Business - No P.O. Box # 3. Making Address Suite, Apt #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E083 (4/07) City & State City & State 4. FEI Number Applied For 20-440 Not Applicable Ζip Country Zip Country \$5.00 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BURNETT, STEPHEN D Street Address (P.O. Box Number is Not Acceptable) 1712 JILLIAN ROAD **BRANDON FL 33510** Zip Code FI 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 arri familiar with, and accept the obligations of registered agent (NCTE Registered Agent signature required when revisitating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By September 5, 2007 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM 11111 ☐ Delete HILL Change Addition NAASE BURNETT, STEPHEN D NAME 1712 JILLIAN ROAD STREET ADORESS STREET ADDRESS BRANDON FL 33510 CITY-ST-ZIP CITY-ST-ZIP MGRM UNE ☐ Delete TITLE ☐ Chance Addition | BURNETT, DELORES D NAME NAME 1712 JILLIAN ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZP BRANDON FL 33510 CITY-ST-ZIP ☐ Gelete TITLE Change Audition iv/ME NAME STREET ADDRESS STREET ADDRESS CITY-ST ZIP CHY-ST-ZIP Oclete ■ Addition NARAG NAM: STREET ADDRESS STREET AUDRESS CITY-SI-ZIP CATY-ST-ZIP C. Detele TITLE TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-SI-7IP TITLE Delete 1111 6 (T) Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST 7/P ST-ZIP 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.

913-263-4809