

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**AD-012008 08:00 AM**  
**Secretary of State**

DOCUMENT # L06000031988



1. Entity Name  
WICKS INDUSTRIES, LLC

Principal Place of Business  
1490 SE LEGACY COVE CIRCLE  
STUART, FL 34997 US

Mailing Address  
1490 SE LEGACY COVE CIRCLE  
STUART, FL 34997 US



03242008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-4576608

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WICKS, HARRY  
1490 SE LEGACY COVE CIRCLE  
STUART, FL 34997

**DO NOT WRITE  
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR  
NAME WICKS, HARRY  
STREET ADDRESS 1490 SE LEGACY COVE CIRCLE  
CITY-ST-ZIP STUART, FL 34997

TITLE  
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000000879927  
04/14/08-80075-015 138.75

**DO NOT WRITE  
IN THIS SPACE**

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

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

Date

Daytime Phone #

3-30-08