

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

01-29-2007 90142 045 ****55.00

DOCUMENT # L06000040295 1. Entity Name S&D ARCHER'S AUTOMOTIVE RESTORATION LLC					
Principal Place of Business 24903 JACKSON STREET ASTATULA, FL 34705 US			Mailing Address 24903 JACKSON STREET ASTATULA, FL 34705 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4613027	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent OXENHOLM, LEA E 24903 JACKSON STREET ASTATULA, FL 34705			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </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 <u><i>Lea E Oxenholm</i></u> DATE <u>1/24/07</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARCHER, CHERYL W 17706 CR 455 MONTEVERDE, FL 34756	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARCHER, LARRY L 24903 JACKSON STREET ASTATULA, FL 34705	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OXENHOLM, LEA E 24903 JACKSON STREET ASTATULA, FL 34705	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARCHER, CHERYL W 17706 CR 455 MONTEVERDE, FL 34756	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARCHER, LARRY L 24903 JACKSON STREET ASTATULA, FL 34705	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR OXENHOLM, LEA E 24903 JACKSON STREET ASTATULA, FL 34705	<input type="checkbox"/> Delete			
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 <u><i>Lea E Oxenholm</i></u> DATE <u>1/24/07</u> 352 636 1750 <small>Signature and typed or printed name of signing managing member, manager, or authorized representative</small>		