


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

03-29-2007 90178 047 ****50.00

DOCUMENT # L06000112776	
1. Entity Name HOTTIES COOL TANS LLC	

Principal Place of Business 4018 HIDDEN RIVER LANE SARASOTA, FL 34240 US	Mailing Address 4018 HIDDEN RIVER LANE SARASOTA, FL 34240 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

30006285



03262007 Chg-LLC CR2E083 (12/06)

4. FEI Number 04-3778077	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SCHWARZENBACH, LARRY J 4018 HIDDEN RIVER LANE SARASOTA, FL 34240
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7. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when re-stating) DATE _____

**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 SCHWARZENBACH, LARRY J 4018 HIDDEN RIVER LANE SARASOTA, FL 34240 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied in 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:  **3-26-07 9413222313**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

MEMORANDUM OF SERVICE

SERVICES OF: Don J Schwarzenbach

ATTACHMENT

30006285

DATE: March 14, 2007

#L06000112776

(A) Our Service:

Basic Services Of Funeral Director & Staff	1,295.00
Embalming	375.00
Other Preparation Of The Body	195.00
Use Of Facilities, Staff & Equipment:	
Visitation/Viewing (conducted at Funeral Home)	425.00
Use Of Staff and Equipment:	
Funeral Ceremony (conducted at another facility)	425.00
Transfer Of Remains To Funeral Home	275.00
Automotive Equipment:	
Casket Coach--(Hearse)	215.00
Other Automobile Equipment	150.00
Limousines	140.00
Casket	3,267.00
Outer Burial Container	930.00
Miscellaneous Merchandise:	
Memorial Package	492.00

Total (A)

8,184.00

(B) Cash Advance Items:

Sales Tax	348.53
Certified Copies of Death Certificates	33.00
Clergy Fees	150.00
Musicians-Soloist-Organist-Bugler	75.00
Opening of Grave and Tent	300.00
Flowers	75.00
Newspaper Notices	339.86
Vault Delivery & Set-up	235.00

Total (B)

1,556.39

(C) Other Items:

Total (C)

SORRY I'm A LITTLE LATE
MY FATHER PAST AWAY. I
WAS OUT OF TOWN FOR 3
WEEKS THANKS *AK*

Total Amount
Less Amount Paid :

9,740.39

Due

9,740.39

SIX ADDITIONAL CERTIFIED DEATH CERTIFICATES

66.00

TOTAL DUE

\$ 9,806.39