


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90234 006 ***138.75

DOCUMENT # L06000115908	
1. Entity Name MARCUS ROLLINS PHAIRBOY, LLC	

Principal Place of Business 106 S "O" STREET STE 7 LAKE WORTH, FL 33460	Mailing Address 106 S "O" STREET STE 7 LAKE WORTH, FL 33460
<i>ADDRESS CHANGES below. MSR</i>	

2. Principal Place of Business - No P.O. Box # 315 No. LAKE DRIVE	3. Mailing Address 315 No. LAKE DRIVE
Suite, Apt. #, etc. 12	Suite, Apt. #, etc. 12

City & State LAKE WORTH, FL	City & State LAKE WORTH, FL
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Zip 33462	Country U.S.A.	Zip 33462	Country U.S.A.
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01072008 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-8010596	<input checked="" type="checkbox"/> 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 ROLLINS, MARC S 106 S "O" STREET STE 7 LAKE WORTH, FL 33460	
<i>ADDRESS AS ABOVE.</i>	

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 <i>Marc S. Rollins</i>	DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. ROLLINS, MARC S 106 S "O" STREET STE 7 LAKE WORTH, FL 33460	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. ROLLINS MARC S. 315 No. LAKE DRIVE #12- LAKE WORTH, FL 33462
<input checked="" type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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: <i>Marc S. Rollins</i>	DATE: <i>4/2/08</i>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE	
Daytime Phone # <i>561-582-8515</i>	