## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000048225

Entity Name: LUCKY SWEEPS LLC

FILED Apr 16, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

9299 COLLEGE PKWY - UNIT 8 9299 COLLEGE PARKWAY FT. MYERS, FL 33919

UNIT 8

FORT MEYERS, FL 33919 US

**Current Mailing Address: New Mailing Address:** 

9299 COLLEGE PKWY - UNIT 8 9299 COLLEGE PARKWAY

FT. MYERS, FL 33919 **UNIT 8** 

FORT MYERS, FL 33919 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

**BUSINESS FILINGS INCORPORATED** 1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE, FL 323012960 US

MANAGING MEMBERS/MANAGERS:

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

MGRM Title: (X) Change ( ) Addition () Delete

MORGAN, JULIA MORGAN, JULIA Name: Name:

Address: 9299 COLLEGE PKWY - UNIT 8 Address: 9299 COLLEGE PARKWAY UNIT 8 City-St-Zip: FT. MYERS, FL 33919 City-St-Zip: FORT MEYERS, FL 33919

Title: MGRM (X) Delete Title: () Change () Addition

Name: MORGAN, MARVIN R Name: Address: 9299 COLLEGE PKWY - UNIT 8 Address: City-St-Zip: FT. MYERS, FL 33919 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JULIA MORGAN **MGRM** 04/16/2008