

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000119810

FILED  
Aug 25, 2008  
Secretary of State

**Entity Name:** FOR ALL SEASONS PATIO FURNITURE, LLC

**Current Principal Place of Business:**

3509 COMMERCIAL WAY  
SPRING HILL, FL 34606

**New Principal Place of Business:**

**Current Mailing Address:**

3509 COMMERCIAL WAY  
SPRING HILL, FL 34606

**New Mailing Address:**

**FEI Number:** 14-2012817      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

DRAGO, ROBERT  
3509 COMMERCIAL WAY  
SPRING HILL, FL 34606      US

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DRAGO, ROBERT  
Address: 3509 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: MGRM ( ) Delete  
Name: DRAGO, KATHLEEN  
Address: 3509 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: MGRM ( ) Delete  
Name: TASARO, MICHAEL  
Address: 3509 COMMERCIAL WAY  
City-St-Zip: SPRING HILL, FL 34606

Title: MGRM ( ) Delete  
Name: TASARO, IRENE  
Address: 11532 FAIRFIELD CT  
City-St-Zip: SPRING HILL, FL 34609

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MICHAEL TASARO

MGRM

08/25/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date