


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L93000000202 1. Entity Name SEVEN D. WHOLESALE OF FLORIDA, L.C.	
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Principal Place of Business 1255 S MILITARY TRAIL STE 210 DEERFIELD BEACH, FL 33442	Mailing Address 3229 PLEASANT VALLEY BLVD. ALTOONA, PA 16602
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DO NOT WRITE IN THIS SPACE



01032005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0384464	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DEGOL, DONALD A
1255 S MILITARY TRAIL
STE 210
DEERFIELD BEACH, FL 33442

DO NOT WRITE IN THIS SPACE

6. 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>Signature, hand or printed name of registered agent and fee if applicable.</i>	NOTE: Registered agent signature required when withdrawing	DATE
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**Filing Fee is \$50.00
Due by May 1, 2005**

7. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEGOL, DONALD A 1255 S MILITARY TRAIL, STE 210 DEERFIELD BEACH, FL 33442
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03/05/05-80029-025 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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: *Donald A. Degol* **2/28/05 814-941-7777**

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DOB City/State/Phone #