2005 LIMITED LIABILITY COMPANY

FILED Apr 12, 2005 8:00 am Secretary of State **ANNUAL REPORT**

Mailing Address

3. Mailing Address

City & State

6. Name and Address of Current Registered Agent

MANAGING MEMBERS/MANAGERS

Suite, Apt. #, etc.

☐ Delete

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5755 POWERLINE ROAD

DOCUMENT # L98000001424

1. Entity Name LO-CHLOR, L.C.

Principal Place of Business

5755 POWERLINE ROAD

FORT LAUDERDALE, FL 33309

2. Principal Place of Business

Suite, Apt. #, etc.

KENT, WILLIAM A

5755 POWERLINE ROAD FORT LAUDERDALE, FL 33309

the obligations of registered agent.

MGRM

MGRM

MGR

VP

KENT, GERA

Filing Fee is \$50.00 Due by May 1, 2005

SIMONS, ANDREW L

KENT, WILLIAM A

CHISLING, GARY R

N.S.W. 2023, AUSTRALIA,

5755 POWERLINE ROAD

5755 POWERLINE ROAD

5755 POWERLINE RD

NATURE AND TYPED OR PRIN

FORT LAUDERDALE, FL 33309

FORT LAUDERDALE, FL 33309

FORT LAUDERDALE, FL 33309

SIGNATURE Signature, typed or printed name of registered agent and title II applicable.

140 VICTORIA ROAD, BELLEVUE HILL

City & State

Zip

9.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-7P

STREET ADDRESS

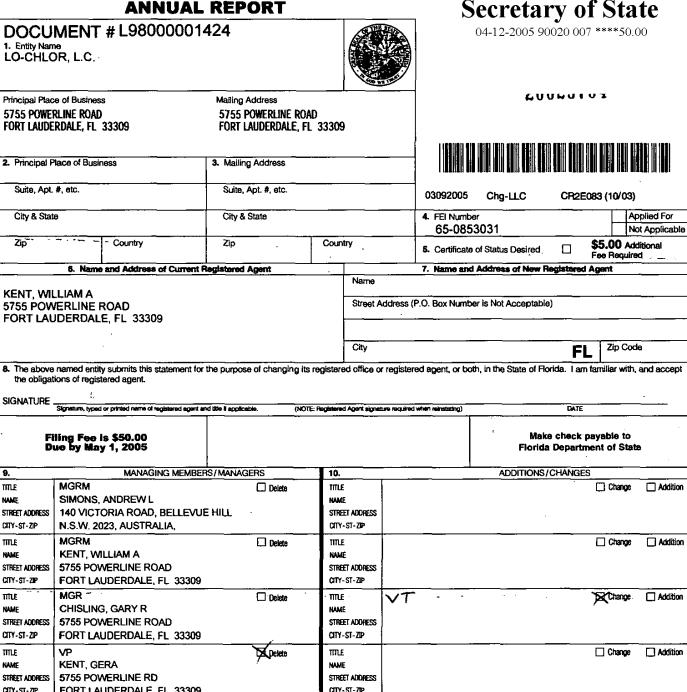
STREET ADDRESS CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



SOE ATTACHTED

☐ Change

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Addition

☐ Addition

CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my eighature 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 emplowered to execute this report as required by Chapter 608, Florida Statutes.

TED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-7P



2005 ANNUAL REPORT ATTACHMENT

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

X ADDITION

TITLE:

S

NAME:

BOLENBAUGH, CRAIG

STREET ADDRESS:

5755 POWERLINE ROAD

CITY-ST-ZIP

FORT LAUDERDALE, FL 33309