


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000004668 1. Entity Name FRANGAR, L.L.C.	
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Principal Place of Business 9870 146TH AVENUE FELLSMERE, FL 32948	Mailing Address 9870 146TH AVENUE FELLSMERE, FL 32948
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DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent FUCHS, FRANK C 9870 146TH AVENUE FELLSMERE, FL 32948	DO NOT WRITE IN THIS SPACE
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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 *Frank C Fuchs* DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FUCHS, FRANK C 9870 146TH AVENUE FELLSMERE, FL 32948
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FUCHS, GARY G 732 NW 42ND STREET FT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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: *Frank C Fuchs* 6/30/04 772-571-0200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #