

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90098 016 \*\*\*\*50.00

**DOCUMENT # L99000006855**

1. Entity Name  
62ND STREET, L.L.C.



Principal Place of Business  
3340 SCHERER DRIVE  
ST PETERSBURG, FL 33716

Mailing Address  
C/O CONTINENTAL COMMERCE CENTER  
3340 SCHERER DR., SUITE A  
ST.PETERSBURG, FL 33716



04192005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

GASSMAN, ALAN S  
1245 COURT STREET  
STE 102  
CLEARWATER, FL 33756

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	WILLJERR LIMITED PARTNERSHIP
STREET ADDRESS	3340 SCHERER DR.
CITY-ST-ZIP	ST.PETERSBURG, FL 33716

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

William A. Gehrand, Trustee of William A. Gehrand Living Trust, General  
**SIGNATURE:** *William A. Gehrand* 4/19/05 727-572-7080 Partner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #