

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 26, 2008 8:00 am
Secretary of State

05-29-2008 90015 006 ****50.00
06-26-2008 90053 006 ****88.75

DOCUMENT # L99000007496

1. Entity Name
PDR FINANCIAL SERVICES, LLC



Principal Place of Business
**29750 U.S. HWY 19 N.
SUITE 101
CLEARWATER, FL 33761-1530 US**

Mailing Address
**29750 U.S. HWY 19 N.
SUITE 101
CLEARWATER, FL 33761-1530 US**

50007504



05022008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3612503

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**PRICE, WILLIAM E
29750 US HWY 19 N., STE 101
CLEARWATER, FL 33761-1530**

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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

**FILE NOW!!! FEE IS \$538.75
Due by September 12, 2008**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
PRICE, WILLIAM E
316 HILLPOINT OR.
PALM HARBOR, FL 34683**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
RIDENOUR, NANCY M
2919 WYCOMBE WAY
PALM HARBOR, FL 34685**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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NAME
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CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

W. E. Price

4/30/08 727-785-4447

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

Date

Daytime Phone #