

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90227 001 ****55.00

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1. Entity Name

THE TOOL STATION, LTD. LLC



Principal Place of Business

750 EAST SAMPLE ROAD
BLDG 1 BAY #1
POMPAÑO BEACH, FL 33064 US

Mailing Address

750 EAST SAMPLE ROAD
BLDG 1 BAY #1
POMPAÑO BEACH, FL 33064 US



02262004 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number

52-2216554

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CARNEY, ZACHARY A
750 E SAMPLE ROAD
BLDG 1 BAY #1
POMPAÑO BEACH, FL 33064

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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 resigning)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE P
NAME CARNEY, WILBUR
STREET ADDRESS 750 E SAMPLE ROAD BLDG 1 BAY #1
CITY-ST-ZIP POMPAÑO BEACH, FL 33064

TITLE T
NAME CARNEY, LAURIE
STREET ADDRESS 750 E SAMPLE ROAD BLDG 1 BAY #1
CITY-ST-ZIP POMPAÑO BEACH, FL 33064

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 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:

Zac A. Carney Zac A. Carney 2-26-04

954-788-8151

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

Date

Daytime Phone #