

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Feb 06, 2008 08:00 AM
Secretary of State

DOCUMENT # M05000001773

1. Entity Name
BLAZAK PARTNERS, LLC



Principal Place of Business
9225 EVENING SHADOW DRIVE
CHATTANOOGA, TN 37421

Mailing Address
9225 EVENING SHADOW DRIVE
CHATTANOOGA, TN 37421



01092008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2555976

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARDY, JAMES H
3183 MARCUS POINT BLVD.
PENSACOLA, FL 32505

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME BLAZAK, RICHARD
STREET ADDRESS 9225 EVENING SHADOW DRIVE
CITY-ST-ZIP CHATTANOOGA, TN 37421

TITLE MGRM
NAME BLAZAK, MARY ANN
STREET ADDRESS 9225 EVENING SHADOW DRIVE
CITY-ST-ZIP CHATTANOOGA, TN 37421

TITLE MGRM
NAME COASTNIN, LYNN
STREET ADDRESS 9105 STONEY MIN
CITY-ST-ZIP CHATTANOOGA, TN 37421

TITLE MGRM
NAME CHASTAIN, KATHY
STREET ADDRESS 9105 STONEY MTN
CITY-ST-ZIP CHATTANOOGA, TN 37421

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *R.M. Blazak* R.M. BLAZAK

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

1-15-08

Date

Daytime Phone #

423
899-3613