

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Aug 03, 2005  
Secretary of State**

DOCUMENT# L00000008451

Entity Name: LONE WOLF DOCK COMPANY, LLC

**Current Principal Place of Business:**

12815 SHELL BEACH RD.  
THORNVILLE, OH 43076

**New Principal Place of Business:**

**Current Mailing Address:**

200 S. ORANGE AVE.  
SUNTRUST CENTER, STE 2300  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 17-9420072      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

A.G.C. CO.  
SUNTRUST CENTER , STE 2300  
200 S. ORANGE AVE  
ORLANDO, FL 32801 US

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WOLFE, ANDREW B  
Address: 12815 SHELL BEACH RD  
City-St-Zip: THORNVILLE, OH 43076

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ANDREW B. WOLFE

MGRM

08/03/2005

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date