

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010787

FILED  
Jun 30, 2005  
Secretary of State

Entity Name: EQUIFLOR CENTRAL FLORIDA PARTNERS, LLC

**Current Principal Place of Business:**

2120 SW 55 STREET RD.  
OCALA, FL 34480

**New Principal Place of Business:**

2120 SW 55 STREET RD.  
OCALA, FL 34474

**Current Mailing Address:**

2120 SW 55 STREET RD.  
OCALA, FL 34480

**New Mailing Address:**

2120 SW 55 STREET RD.  
OCALA, FL 34474

FEI Number: 59-3725808      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:**

KLEIN, H. RANDOLPH  
333 NW 3 AVENUE  
OCALA, FL 34470    US

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

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: MGRP ( ) Delete  
Name: SARANDES, ANTHONY A  
Address: 2120 SW 55 STREET RD.  
City-St-Zip: Ocala, FL 34480

Title: T ( ) Delete  
Name: ELLSPERMANN, CARL  
Address: 2120 SW 55 ST RD  
City-St-Zip: Ocala, FL 34474

Title: S ( ) Delete  
Name: CHAMBLESS, CHARLOTTE  
Address: 2120 SW 55 ST RD  
City-St-Zip: Ocala, FL 34474

**ADDITIONS/CHANGES:**

Title: MGRP (X) Change ( ) Addition  
Name: SARANDES, ANTHONY A  
Address: 2120 SW 55 STREET RD.  
City-St-Zip: Ocala, FL 34474

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

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: CHARLOTTE CHAMBLESS

SEC

06/30/2005

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