2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

ANTIONE ILEI OILI					
DOCUMENT # L010 1. Entity Name 1555 BOREN, LLC	00022729				
Principal Place of Business <unused> 0COEE, FL 34761</unused>	Mailing Address 1555 BOREN DR. 000EE, FL 34761				



DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
59-3534713	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WUBKER, WARREN W 1555 BOREN DR. OCOEE, FL 34761 ___

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

the obligat	tions of registered agent.	• • • • • • • • • • • • • • • • • • • •		,
SIGNATURE.			·	
	Signature Typed or printed name of registered agent and title if applicable	(NOTE Registered Agent sig	gnature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	WUBKER, WARREN W			
STREET ADDRESS	6625 CRENSHAW DRIVE			
CITY-ST-ZIP	ORLANDO, FL 32835			
TITLE	MGRM			
NAME	HALL, CHARLES B			U00000315460
STREET ADDRESS	1407 KELSO BLVD			04/19/05-80036-004 50.00
CITY - ST - ZIP	WINDERMERE, FL 34786	.i		is in the participant days and any
TITLE	MGRM			
NAME.	JONES, RICHARD E			
STREET ADDRESS	13212 LAKE BUTLER BOULEVARD		no	NAT WOITE
CITY-ST-ZIP	WINTER GARDEN, FL 34787		טט	NOT WRITE
TITLE			INI T	HIS SPACE
NAME			IIV I	IIIS SPACE
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
MARKE		1		

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

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 employeed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Such and Signing Managing Member, Of Authorized Representative Date