


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000005172
 1. Entity Name
 OPEN WINDOW PRODUCTIONS, L.L.C.



Principal Place of Business: 3986 TARIAN COURT, PALM HARBOR, FL 34684
 Mailing Address: 31940 US HWY 19, PALM HARBOR, FL 34684



03312005 No Chg-LLC CR2E083 (10/03)

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4. FEI Number: 74-3030972 Applied For: Not Applicable
 5. Certificate of Status Desired: \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 JOHNSON, DANIEL F CPA
 31940 US HWY 19 N.
 PALM HARBOR, FL 34684

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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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SHARPE, LYNN ANNE
STREET ADDRESS	3986 TARIAN COURT
CITY - ST - ZIP	PALM HARBOR, FL 34684
TITLE	MGR
NAME	SHARPE, FRANK J
STREET ADDRESS	3986 TARIAN COURT
CITY - ST - ZIP	PALM HARBOR, FL 34684
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
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CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/04/05-80096-012 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Frank J. Sharpe Date: 3/31/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #