2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# L02000030809

Entity Name: MCFUNBALL ENTERPRISES, LLC

Current Principal Place of Business:

8705 ASHWORTH DRIVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

8705 ASHWORTH DRIVE
TAMPA, FL 33647

New Mailing Address:

FEI Number: 22-3886435 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REGISTERED CORPORATE AGENTS, INC.
612 SOUTH GREENWOOD AVENUE
CLEARWATER, FL 33756 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/MEMBERS:

Title: MGR ( ) Delete
Name: BALLA, JOHN A
Address: 3308 W LAWN AVE
City-St-Zip: TAMPA, FL 33611 US

Title: MGR ( ) Delete
Name: FUNT, JOSHUA H
Address: 15902 DANBORO CT
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM ( ) Delete
Name: MCMANUS, VICKI G
Address: 8705 ASHWORTH DRIVE
City-St-Zip: TAMPA, FL 336472269 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: FUNT, JOSHUA H
Address: 5016 SOUTHAMPTON CIRCLE
City-St-Zip: TAMPA, FL 33647 US

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: VICKI G. MCMANUS MGRM 04/27/2005

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