

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004990

FILED
Apr 29, 2005
Secretary of State

Entity Name: VOLCANO'S LICENSING, L.L.C.

Current Principal Place of Business:

150 N. WESTMONTE DR
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

1901 WEST STATE ROAD 434
LONGWOOD, FL 32750

Current Mailing Address:

150 N. WESTMONTE DR
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

1855 WEST STATE ROAD 434
LONGWOOD, FL 32750

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOHNSON, SCOTT E ESQ
111 N ORANGE AVE, STE 1200
ORLANDO, FL 32801 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: RITENOUR, JOHN
Address: 150 N. WESTMONTE DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: RITENOUR, JOHN
Address: 1855 WEST STATE ROAD 434
City-St-Zip: LONGWOOD, FL 32750

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: JOHN K. RITENOUR

MGR

04/29/2005

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