

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046065

FILED
May 03, 2005
Secretary of State

Entity Name: COLSON & CO. LLC

Current Principal Place of Business:

P.O. BOX 560004
ORLANDO, FL 32856 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560004
ORLANDO, FL 32856 US

New Mailing Address:

FEI Number: 14-1910330 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:

COLSON, DOUGLAS
6609 THE LANDINGS DR.
ORLANDO, FL 32812 US

Name and Address of New Registered Agent:

COLSON, DOUGLAS
7041 LAKE DR
ORLANDO, FL 32856 US

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: S. DOUGLAS COLSON

05/03/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: COLSON, DOUGLAS
Address: P.O. BOX 560004
City-St-Zip: ORLANDO, FL 32856 US

Title: MGRM () Delete
Name: SCHAEFER, SCOTT C
Address: 602 WAVECREST DR.
City-St-Zip: ORLANDO, FL 32807 US

ADDITIONS/CHANGES:

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: SCOTT SCHAEFER

MGMR

05/03/2005

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