2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 24, 2005 8:00 am Secretary of State

70-146-167-7-Not Ap	15635	20015635		Mailing Address 9580 DELEGATES DR ORLANDO, FL 32837 3. Mailing Address	ame NCE GROUP, LLC ace of Business EGATES DR FL 32837	1. Entity Name SUNDANCE GROU Principal Place of Business 9580 DELEGATES DR ORLANDO, FL 32837
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	\$5.00 Additional Fee Regulred	5. Certificate of Status Desired \$5.00 Ad	Country	Zip (Country	Zip
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent	·			Registered Agent	6. Name and Address of Current	6. Name a
BLODIG, GREGORY J			Name	-	. GREGORY J	BLODIG, GREGORY
100 W. CYPRESS CREEK RD, STE 700 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE, FL 33309		ress (P.O. Box Number is Not Acceptable)	Street Address (YPRESS CREEK RD, STE 700	
City FL Zip Code	FL Zip Code	FL Zip Co	Cin			
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 the obligations of registered agent.	· — 1		City			
		spice of agent, or both, in the State of Horida. I am lamital will		the purpose of changing its reg	we named entity submits this statement fo pations of registered agent.	FORT LAUDERDALE 8. The above named entity:
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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)(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 on the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ____

PED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

| 2 | 0 5 4 5 7 - 2 4 0 - 1 | | Date | Dayline Phone #