

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065650

Entity Name: TWO WRIGHT, LLC

FILED
Feb 09, 2005
Secretary of State

Current Principal Place of Business:

12551 ALLENDALE CIRCLE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 61317
FORT MYERS, FL 339061317

New Mailing Address:

FEI Number: 20-1618143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITESMAN, GUY E
1415 MONROE STREET
FORT MYERS, FL 33901 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: WRIGHT, GARY A
Address: 12551 ALLENDALE CIRCLE
City-St-Zip: FORT MYERS, FL 33912

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: WRIGHT, LORRAINE S
Address: 12551 ALLENDALE CIRCLE
City-St-Zip: FORT MYERS, FL 33912

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: LORRAINE S. WRIGHT

MGR

02/09/2005

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