
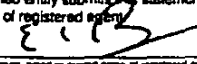
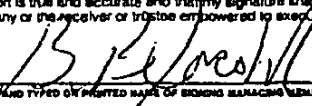


FILED
Jun 16, 2005 8:00 am
Secretary of State

**2005 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

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05-02-2005 90085 048 ****50.00

DOCUMENT # L04000084685					
1. Entity Name ASCENT ENTERPRISES, LLC					
Principal Place of Business 7880 SADDLEBROOK DRIVE PORT ST. LUCIE, FL 34986			Mailing Address 7880 SADDLEBROOK DRIVE PORT ST. LUCIE, FL 34986		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number EIN 20-1928382	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
City & State		City & State		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SWEENEY, PETER J JR 3333 20TH STREET VERO BEACH, FL 32960			7. Name and Address of New Registered Agent EDWARD W. BECHT, ESQ 321 South Second Street Fort Pierce FL 34950		
8. The above named entry 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 accept the obligations of registered agent.					
SIGNATURE 		EDWARD W. BECHT		DATE 4/28/05	
Filing Fee is \$50.00 Due by May 1, 2005				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS					
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME
	President	BRIAN B JACOBUS JR.	7880 SADDLEBROOK DR PORT ST. LUCIE FL 34986	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 		Brian Jacobus 4/28/05 772-340-0023			