


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # M03000002388  
1. Entity Name  
165 SPRINGS-FIREPLACE ROAD LLC



Principal Place of Business  
21 SQUIRES PATH  
EAST HAMPTON, NY 11937

Mailing Address  
21 SQUIRES PATH  
EAST HAMPTON, NY 11937

**DO NOT WRITE IN THIS SPACE**



01122005 No Chg-LLC CR2E083 (10/03)

4. FEI Number  
11-3554864

Applied For  
Not Applicable

5. Certificate of Status Desired  \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
AGENTS AND CORPORATIONS, INC.  
773 4TH AVE. NORTH  
NAPLES, FL 34102

**DO NOT WRITE  
IN THIS SPACE**

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 accept the obligations of registered agent.

SIGNATURE: Robert Cooper DATE: 1-28-05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COOPER, ROBERT 21 SQUIRES PATH EAST HAMPTON, NY 11937
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U00000203963  
01/29/05-80052-002 50.00

**DO NOT WRITE  
IN THIS SPACE**

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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [Signature] DATE: 1-28-05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE. Daytime Phone #