2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2005
Secretary of State

DOCUMENT# L04000048023

Entity Name: 21CENTS, LLC

Current Principal Place of Business:

4840 SOUTH PENINSULA DRIVE
PONCE INLET, FL 32127

New Principal Place of Business:

Current Mailing Address:

4840 SOUTH PENINSULA DRIVE
PONCE INLET, FL 32127

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHARPLES, D. KENT
4840 SOUTH PENINSULA DRIVE
PONCE INLET, FL 32127 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: SHARPLES, D. KENT
Address: 4840 SOUTH PENINSULA DRIVE
City-St-Zip: PONCE INLET, FL 32127

Title: MGR ( ) Delete
Name: SPIWAK, RAND S
Address: 10 CANTERBURY WOODS
City-St-Zip: ORMOND BEACH, FL 32174

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: DARRLED K. SHARPLES MGR 02/15/2005

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