


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Aug 01, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # M03000002942  
1. Entity Name  
COOKE GOVERNMENT SYSTEMS, L.L.C.



Principal Place of Business      Mailing Address  
3420 NORTHSIDE DR.      P.O. BOX 1800  
KEY WEST, FL 33040      KEY WEST, FL 33041

**DO NOT WRITE IN THIS SPACE**



07272005No Chg-LLC      CR2E083 (10/03)

4. FEI Number 76-0741233	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
CLARIN, PAUL  
P.O. BOX 1800  
KEY WEST, FL 33041

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
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 September 7, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR COOKE, JOHN KENT SR. PO BOX 1887 MIDDLEBURG, VA 20117
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U00000375311  
08/01/05-80013-009 50.00

**DO NOT WRITE  
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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:       Date: 7/27/05      Daytime Phone #: 305 292 7777 x202

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