

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001757

Entity Name: INGA FAHS-GIELISSE, LLC

FILED  
Jan 10, 2005  
Secretary of State

## Current Principal Place of Business:

2709 KILLEARNY WAY STE 4  
TALLAHASSEE, FL 32309

## New Principal Place of Business:

2709 KILLARNEY WAY, STE 4  
TALLAHASSEE, FL 32309

## Current Mailing Address:

2709 KILLEARNY WAY STE 5  
TALLAHASSEE, FL 32309

## New Mailing Address:

2709 KILLARNEY WAY, STE 4  
TALLAHASSEE, FL 32309

FEI Number: 59-3627189

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAHS-GIELISSE, INGA  
2709 KILLERANY WAY  
TALLAHASSEE, FL 32308 US

## Name and Address of New Registered Agent:

FAHS-GIELISSE, INGA  
2709 KILLARNEY WAY, STE 4  
TALLAHASSEE, FL 32309 US

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: INGA FAHS-GIELISSE

01/10/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: FAHS-GIELISSE, INGA G  
Address: 5667 SANTA ANITA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FAHS-GIELISSE, INGA G  
Address: 5667 SANTA ANITA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

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: INGA G. FAHS-GIELISSE

MGRM

01/10/2005

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