2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2005
Secretary of State

DOCUMENT# L00000010838

Entity Name: ECSTASEA, LLC

Current Principal Place of Business:

3681 N.E. 7TH ST.
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

2050 SE 73RD LOOP
OCALA, FL 34480

New Mailing Address:

FEI Number: 59-3705948 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

USHER, DEBORAH LYNN
2050 SE 73RD LOOP
OCALA, FL 34480 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:	MGRM	( ) Delete
Name:	USHER, DEBORAH LYNN	
Address:	2050 SE 73RD LOOP	
City-St-Zip:	OCALA, FL 34480	
Title:	MGRM	( ) Delete
Name:	REGGIO, DEBORAH	
Address:	9724 DART STREET	
City-St-Zip:	RIVER RIDGE, LA 70123	
Title:	MGRM	( ) Delete
Name:	THOMAS, REBECCA	
Address:	1301 SW 43RD PLACE	
City-St-Zip:	OCALA, FL 34474	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: DEBORAH USHER MGRM 05/03/2005

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