

## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # L00000012830</b> 1. Entity Name <b>YELLOW LLC</b>			
Principal Place of Business <b>5604 N ATLANTIC AVENUE COCOA BEACH, FL 32931</b>		Mailing Address <b>5604 N ATLANTIC AVENUE COCOA BEACH, FL 32931</b>	
<b>DO NOT WRITE IN THIS SPACE</b>		 03222005 No Chg-LLC      CR2E083 (10/03)	
4. FEI Number <b>59-3677253</b>		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>GREENE, JANICE 5604 N ATLANTIC AVENUE COCOA BEACH, FL 32931</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when reinstating)      DATE</small>			
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>		<b>DO NOT WRITE IN THIS SPACE</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENE, JANICE 5604 N ATLANTIC AVE COCOA BEACH, FL 32931		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GREENE, MARTIN 5604 N ATLANTIC AVE COCOA BEACH, FL 32931		
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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)(b), 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.			
<b>SIGNATURE:</b> <i>J. Greene</i> <i>J. Greene</i> <b>321-868-7343</b>		Date      Daytime Phone #	