

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000016171

Entity Name: BATTERY CONCEPTS LLC

FILED  
Jan 26, 2005  
Secretary of State

**Current Principal Place of Business:**

218 EAST BEARS AVE  
#409  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

218 EAST BEARS AVE  
#409  
TAMPA, FL 33613

**New Mailing Address:**

FEI Number: 03-0395988

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOBBS, ROBERT S  
3719 SWANN AVENUE  
TAMPA, FL 33607 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: SCAGLIONE, RONALD E  
Address: 15009 N FLORIDA AVE #409  
City-St-Zip: TAMPA, FL

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SCAGLIONE, RONALD E  
Address: 218 E BEARSS #409  
City-St-Zip: TAMPA, FL

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: RONALD E. SCAGLIONE

MGRM

01/26/2005

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