

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002215

FILED  
Jul 19, 2005  
Secretary of State

Entity Name: SHUTTER QUALITY ASSURANCE GROUP, LLC

**Current Principal Place of Business:**

12040 MIRAMAR PARKWAY  
MIRAMAR, FL 33025

**New Principal Place of Business:**

11850 MIRAMAR PARKWAY  
MIRAMAR, FL 33025

**Current Mailing Address:**

12040 MIRAMAR PARKWAY  
MIRAMAR, FL 33025

**New Mailing Address:**

11850 MIRAMAR PARKWAY  
MIRAMAR, FL 33025

FEI Number: 65-1082459      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

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

FILEDSTONE, RONALD R  
201 ALHAMBRA CIRCLE  
SUITE 600  
CORAL GABLES, FL 33134 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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: D ( ) Delete  
Name: ROBINSON, JEFFRY T  
Address: 12040 MIRAMAR PKWY.  
City-St-Zip: MIRAMAR, FL 33025

Title: MGR ( ) Delete  
Name: KIBLER, LAWRENCE L  
Address: 12040 MIRAMAR PKWY.  
City-St-Zip: MIRAMAR, FL 33025

**ADDITIONS/CHANGES:**

Title: D (X) Change ( ) Addition  
Name: ROBINSON, JEFFRY T  
Address: 11850 MIRAMAR PARKWAY  
City-St-Zip: MIRAMAR, FL 33025

Title: MGR (X) Change ( ) Addition  
Name: KIBLER, LAWRENCE L  
Address: 11850 MIRAMAR PARKWAY  
City-St-Zip: MIRAMAR, FL 33025

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: JEFFRY T. ROBINSON

MGR

07/19/2005

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