2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 23, 2005 08:00 AM Secretary of State

	ANNUAL REPORT		Mar 23, 2005 08:00
1. Entity Nar	MENT # L01000005610		Secretary of State
Principal Place of Business Mailing Address 177 N. US HWY 1 177 N. US HWY 1 BOX 240 BOX 240 JUPITER, FL 33469 JUPITER, FL 33469			
DO NOT WRITE IN THIS SPA		CE	03172005 No Chg-LLC CR2E083 (10/03) 4. FEI Number Applied For 65-1116593 Not Applied 5. Certificate of Status Desired S5.00 Additional Fee Required
	6. Name and Address of Current Registered Agent	· · · · · · · · · · · · · · · · · · ·	
WRIGHT, LARRY E 11 DEWITT PLACE _ TEQUESTA, FL 33469			DO NOT WRITE IN THIS SPACE
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			
Filing Fee is \$50.00 Due by May 1, 2005			U00000273799 03/23/05-80043-002 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS WRIGHT, LARRY E 11 DEWITT PLACE TEQUESTA, FL 33469		· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby	certify that the information supplied with this hing does not quality for the exition this report is true and acceptate and that have signature shall have the sar ibility company or the receiver or trustee empty ered to execute this report	remption stated in Se the legal effect as if mass required by Chapt	ction 119.07(3)(i), Florida Statutes. I further certify that the information lade under oath; that I am a managing member or manager of the er 608, Florida Statutes.

SIGNATURE:

URE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3-26-05

561-602-997

Daytime Phone #