

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009605

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** LEFT COAST MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

P.O. BOX 14067  
BRADENTON, FL 342804067 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 14067  
BRADENTON, FL 342804067 US

**New Mailing Address:**

**FEI Number:** 65-1123527

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD, SUZANNE L  
P. O. BOX 14067  
BRADENTON, FL 342804067 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: MGR ( ) Delete  
Name: WARD, KERRY J  
Address: 6805 7TH AVENUE BLVD NW  
City-St-Zip: BRADENTON, FL 34209 US

Title: MGR ( ) Delete  
Name: CROWDER, RONALD W  
Address: 7214 7TH AVENUE NW  
City-St-Zip: BRADENTON, FL 34209 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: WARD, SUZANNE L  
Address: 6805 7TH AVENUE BLVD NW  
City-St-Zip: BRADENTON, FL 34209 US

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: SUZANNE L. WARD

MGR

04/27/2005

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