

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000010702

1. Entity Name
 FERKING FAMILY LLC



Principal Place of Business
 1707 E. MICHIGAN AVE.
 ORLANDO, FL 32806

Mailing Address
 1707 E. MICHIGAN AVE.
 ORLANDO, FL 32806



07282005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3728101	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

FLICK, JAMES J
 608 E CENTRAL BLVD
 ORLANDO, FL 32801

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by September 7, 2005

U00000375367

08/02/05-80001-017 55.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	FERKING, CARL R
STREET ADDRESS	1707 E MICHIGAN AVE
CITY-ST-ZIP	ORLANDO, FL 32806

TITLE	MGR
NAME	FERKING, RHEBA
STREET ADDRESS	1707 E. MICHIGAN AVE.
CITY-ST-ZIP	ORLANDO, FL 32806

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

Rheba Ferking

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

7/29/05 407-898-5781

Date

Daytime Phone #