## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L01000014656

Entity Name: SIA PROPERTIES, L.L.C.

CLEARWATER, FL 33755

City-St-Zip:

FILED Mar 09, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4243 LITTLE OSPREY DR. TALLAHASSEE, FL 32303 **Current Mailing Address: New Mailing Address:** 4243 LITTLE OSPREY DR TALLAHASSEE, FL 32303 FEI Number: 90-0008687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCSOLEY, JAMES H 127 SALEM COURT TALLAHASSEE, FL 32301 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/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MCSOLEY, JAMES H Name: Name: 4243 LITTLE OSPREY DR. Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCSOLEY, BRENDAN Name: Name: Address: 6604 QUIET COVE COURT Address: City-St-Zip: RALEIGH, NC 27612 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition OHRN, MARY R Name: Name: Address: 8022 YACHTSMANS DR Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: MCSOLEY, MARY M Name: Address: 215 S.E. 3RD AVE. Address: City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition MCSOLEY, MICHAEL Name: Name: MCSOLEY, MICHAEL 1524 SE ROYAL GREEN CIR APT Q 507A SOUTH 10TH ST Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34952 City-St-Zip: FT PIERCE, FL 34950 Title: MGRM ( ) Delete Title: () Change () Addition MCSOLEY, STEPHEN Name: Name: Address: 1303 LYNN AVE Address:

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.

City-St-Zip:

SIGNATURE: JAMES H MCSOLEY MGRM 03/09/2005