

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000015757

**FILED**  
**Jan 24, 2005**  
**Secretary of State**

**Entity Name:** BUSINESS CPR, LLC

**Current Principal Place of Business:**

1505 NORTH GREENLEAF COURT  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

**Current Mailing Address:**

1505 NORTH GREENLEAF COURT  
WINTER SPRINGS, FL 32708

**New Mailing Address:**

**FEI Number:** 59-3744920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANNWACKER, MICHEAL  
1505 N. GREENLEAF COURT  
WINTER SPRINGS, FL 32708 US

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

HANNWACKER, MICHAEL  
1505 N. GREENLEAF COURT  
WINTER SPRINGS, FL 32708 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: MICHAEL HANNWACKER

01/24/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HANNWACKER, MICHAEL  
Address: 1505 N. GREENLEAF CT  
City-St-Zip: WINTER SPRINGS, FL 32708

**ADDITIONS/CHANGES:**

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

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: MICHAEL HANNWACKER

MGRM

01/24/2005

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