## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018154

Entity Name: ENIX & ASSOCIATES, LLC

FILED Jan 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11313 DAVISON LANE P.O. BOX 867

TAVARES, FL 32778 TAVARES, FL 32778

Current Mailing Address: New Mailing Address:

11313 DAVISON LANE P.O. BOX 867

TAVARES, FL 32778 TAVARES, FL 32778

FEI Number: 29-1586790 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

LOWMAN, WILLIAM R JR. ESQ SCHULTE, TIMOTHY
315 E. ROBINSON STREET, SUITE 600 315 E. ROBINSON STREET
ORI ANDO FI 32801 US SUITE 600

ORLANDO, FL 32801 US SUITE 600 ORLANDO, FL 32801 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: TIMOTHY SCHULTE 01/13/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 ENIX, DAVID A MGR
 Name:
 ENIX, DAVID A MGR

 Address:
 11313 DAVISON LANE
 Address:
 P.O. BOX 867

 City-St-Zip:
 TAVARES, FL 32778
 City-St-Zip:
 TAVARES, FL 32778

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: DAVID ENIX MGR 01/13/2005