

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019230

FILED  
Jan 24, 2005  
Secretary of State

Entity Name: SERVICE NET SOLUTIONS OF FLORIDA LLC

**Current Principal Place of Business:**

650 MISSOURI AVENUE  
JEFFERSONVILLE, IN 47130

**New Principal Place of Business:**

**Current Mailing Address:**

650 MISSOURI AVENUE  
JEFFERSONVILLE, IN 47130

**New Mailing Address:**

FEI Number: 30-0745238      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MEENAN, TIMOTHY J  
BLANK, MEENAN & SMITH, P.A.  
204 SOUTH MONROE STREET  
TALLAHASSEE, FL 32301 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: ROBBINS, LANSDON B  
Address: 12018 HUNTING CREST DR  
City-St-Zip: PROSPECT, KY 40059

Title: MGR ( ) Delete  
Name: CALLAHAN, KEVIN M  
Address: 9904 GLEN VISTA DR  
City-St-Zip: PROSPECT, KY 40059

Title: MGR (X) Delete  
Name: SCHWERTLEY, E. WAYNE  
Address: 2222 VALLEY VISTA RD  
City-St-Zip: LOUISVILLE, KY 40205

Title: MGRM (X) Delete  
Name: SERVICE NET SOLUTION, S , LLC  
Address: 650 MISSOURI AVE  
City-St-Zip: JEFFERSONVILLE, IN 47130

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MOSTOFI, JAMES E  
Address: 2406 GLENVIEW AVE  
City-St-Zip: LOUISVILLE, KY 40222

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

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

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: KEVIN M CALLAHAN

MGR

01/24/2005

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