## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **ANNUAL REPORT** Mar 03, 2005 08:00 AM DOCUMENT # L01000022399 **Secretary of State** 1. Entity Name FDS INVESTMENTS, LLC Principal Place of Business Mailing Address 1819 MAIN ST., SUITE 230 1819 MAIN ST., SUITE 230 SARASOTA, FL 34236 SARASOTA, FL 34236 02242005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEi Number 80-0028769 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SILBERSTEIN, DAVID M DO NOT WRITE 720 S. ORANGE AVENUE SARASOTA, FL 34236 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 reinstaling) DATE Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGR TITLE WACHOVA BANK NAME 1819 MAIN ST., SUITE 230 STREET ADDRESS \_\_\_\_U000**0**0250911 03704/05-80**03**0-003 50.00 CITY-ST-ZIP SARASOTA, FL 34236 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

JRE: By: June 110 Jun

2/24/05

941.361.5810

Daytima Phone #

**FILED**