## **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## Apr 27, 2005 08:00 AM Secretary of State **DOCUMENT # L02000002462** 1. Entity Name CYBERSTEVE PROPERTIES, LLC Principal Place of Business Mailing Address 3616 HARDEN BLVD 3616 HARDEN BLVD SUITE 325 SUITE 325 LAKELAND, FL 33803 LAKELAND, FL 33803 CR2E083 (10/03) 04092005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-3642758 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ULLOM, STEVEN J DO NOT WRITE 3089 BELLFLOWER WAY LAKELAND, FL 33811 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 RESIDENT 05 SIGNATURE (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE ULLOM, STEVEN J 3089 BELLFLOWER WAY STREET ADDRESS 04/27/05-80(37-00) S0.00 CITY-ST-ZIP LAKELAND, FL 33811 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 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 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.

CEO Pasident

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING HEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED** 

24/05

X63-248-2280