## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

## Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # L02000003175 CRACKER DOG. LLC Principal Place of Business Mailing Address 3079 ANDERSON RD 3079 ANDERSON RD GREEN COVE SPRINGS, FL 32043 GREEN COVE SPRINGS, FL 32043 01112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE TAYLOR, JAMES J 420 SOUTH LAWRENCE BLVD. KEYSTONE HEIGHTS, FL 32656 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office of 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 liftle if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 U00000341507 Due by May 1, 2005 04/29/05-80017-022 50.00 9. MANAGING MEMBERS/MANAGERS MGR TITLE RYAN, ZAC E. W NAME 3079 ANDERSON RD STREET ADDRESS CITY-ST-ZIP GREEN COVE SPRINGS, FL 32043 THE 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 CTTY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

**FILED**