2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2005
Secretary of State

DOCUMENT# L02000004507

Entity Name: 3162 FIRE ROAD LLC

Current Principal Place of Business:

9293 NW 15TH STREET
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

9293 NW 15TH STREET
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 75-3025427 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREBE, KURT R II
9293 NW 15TH STREET
CORAL SPRINGS, FL 33071 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: MGRM ( ) Delete
Name: GREBE, KURT R II
Address: 9293 NW 15TH STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGRM ( ) Delete
Name: GREBE, CYNTHIA
Address: 9293 NW 15TH STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: PENDER, CYNTHIA
Address: 9293 NW 15TH STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGRM ( ) Change (X) Addition
Name: PENDER, BRUCE
Address: 9293 NW 15TH STREET
City-St-Zip: CORAL SPRINGS, FL 33071

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: BRUCE PENDER MGRM 04/24/2005

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