2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 29, 2005
Secretary of State

DOCUMENT# L02000005176

Entity Name: STRATEGIC RESOURCES MANAGEMENT, LLC

Current Principal Place of Business:

1875 STEVENSON AVE
CLEARWATER, FL 33755

New Principal Place of Business:

Current Mailing Address:

1875 STEVENSON AVE
CLEARWATER, FL 33755

New Mailing Address:

FEI Number: 04-3629584 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FOSTER, BILL G
1875 STEVENSON AVE
CLEARWATER, FL 33755 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/MANAGERS:

Title:	MGRM	( ) Delete
Name:	FOSTER, BILL G	
Address:	1875 STEVENSON AVE	
City-St-Zip:	CLEARWATER, FL 33755	
Title:	MGRM	( ) Delete
Name:	TEAGARDEN, SYDNEY	
Address:	819 1/2 6TH ST. NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33701	
Title:	MGR	( ) Delete
Name:	FOSTER, MEGHAN	
Address:	9033 RUBIO AVE	
City-St-Zip:	NORTH HILLS, CA 91343	
Title:	MGR	( ) Delete
Name:	FOSTER, KIMBERLY H	
Address:	5112 NORTH BARTLETT AVE	
City-St-Zip:	SAN GABRIEL, CA 91776	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: BILL G. FOSTER MGR. 06/29/2005

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