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

## **FILED** Apr 01, 2005 8:00 am Secretary of State 04-01-2005 90155 008 \*\*\*\*50.00

Principal Place of Business 2301 FORSYTH RD. ORLANDO, FL 32807  2. Principal Place of Business Suite, Apt. #, etc.  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Signar Address of Status Desired of Status Desired  6. Name and Address of Current Registered Agent  COOPER, DONALD 2301 FORSYTH RD. ORLANDO, FL 32807  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Filing Fee is \$50.00  Due by May 1, 2005  Make check payable to Florida Department of State  COOPER, DONALD  Street Address (P.O. Box Number is Not Acceptable)  Applications of registered agent.  SiGNATURE  Filing Fee is \$50.00  Make check payable to Florida Department of State  ADDITIONS/CHANGES  INTE  WAS  COOPER, DONALD  Signars, yiped o prined nere of registered Agent within a fapicable.  Make Check payable to Florida Department of State  ADDITIONS/CHANGES  City St-2P  COOPER, DONALD  Signer Address (P.O. Box Number is Not Acceptable)  ADDITIONS/CHANGES  City St-2P  COOPER, DONALD  Signer Address (P.O. Box Number is Not Acceptable)  Change   James   James
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Zip Country Zip Country 5. Certificate of Status Desired Agent Status Desired Agent Status Desired Status Desired Status Desired Agent Status
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  COOPER, DONALD 2301 FORSYTH RD. ORLANDO, FL 32807  City  City  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and as the obligations of registered agent.  SIGNATURE  Filling Fee is \$50.00  Due by May 1, 2005  Make check payable to Florida Department of State  9. MANAGING MEMBERS/MANAGERS  10. ADDITIONS/CHANGES  INTE  P  MANAGING MEMBERS/MANAGERS  10. ADDITIONS/CHANGES  COOPER, DONALD  NAME STREET ADDRESS CITY-ST-2P  ORLANDO, FL 32807  CITY-ST-2P  ORLANDO, FL 32807
Name    Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code  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 Rovida. I am familiar with, and as the obligations of registered agent.  SIGNATURE  Signature, typed or prined name of registered agent and title # applicable. (NOTE: Registered Agent signature required when rensisting)  DATE  Filling Fee is \$50.00  Due by May 1, 2005  ManaGING MEMBERS/MANAGERS  10. ADDITIONS/CHANGES  INTEE NAME  COOPER, DONALD  STREET ADDRESS  CITY-ST-2P  ORLANDO, FL 32807  Street Address (P.O. Box Number is Not Acceptable)  The Zip Code  Make check payable to Florida Department of State  The Address (P.O. Box Number is Not Acceptable)  I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent, or both, in the State of Rovida. I am familiar with, and as the obligations of registered agent and interest agent and interest agent and interest agent agent and interest agent agent and interest agent agent and interest agent ag
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