2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007444

Entity Name: FEWSTER ENTERPRISES, LLC

FILED Jun 29, 2005 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:		
12155 ME ⁻	TRO PARKWAY	·		
SUITE 25 <i>F</i> FT. MYER	A S, FL 33912			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
	TRO PARKWAY			
SUITE 25 <i>F</i> FT. MYER	s, FL 33912			
	: 02-0583189 FEI Number Applied For ce with s. 607.193(2)(b), F.S., the limited liab	() FEI Number Not Applicable () Certificate of lity company did not receive the prior notice.	Status Desired (X)	
Name and	Address of Current Registered Age	nt: Name and Address of New Registe	red Agent:	
FOWLER FT. MYER	OND STREET 5TH FLOOR WHITE BOGGS BANKER P.A. S, FL 33901 US	or the purpose of changing its registered office or regis	tered agent or both	
	e of Florida.	The purpose of changing its registered office of regis	tered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Register	ed Agent Date)	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	P () Delete FEWSTER, THOMAS G JR 12155 METRO PKWAY FT MYERS, FL	Title: () Change () Ac Name: Address: City-St-Zip:	ldition	
Title: Name: Address: City-St-Zip:	D () Delete FEWSTER, BEVERLY 12155 METRO PKWAY FT MYERS, FL	Title: () Change () Ac Name: Address: City-St-Zip:	ldition	
Title: Name: Address: City-St-Zip:	D () Delete FEWSTER, BARBARA 12155 METRO PKWAY FT MYERS, FL	Title: () Change () Ac Name: Address: City-St-Zip:	ldition	
Title: Name: Address: City-St-Zip:	D () Delete THUENTE, LORI 1126 OAKDALE CHICAGO, IL 60657	Title: () Change () Ac Name: Address: City-St-Zip:	ldition	
Title:	D () Delete	Title: () Change () Ac	ldition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: THOMAS G. FEWSTER, JR.

FEWSTER, THOMAS C SR.

12153 METRO PKWY

FT. MYERS, FL

Name:

Address:

City-St-Zip: