

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013552

Entity Name: E-Z STREET RENTALS LLC

FILED
Apr 22, 2005
Secretary of State

Current Principal Place of Business:

15318 PETRUS LN
CLERMONT, FL 34711

New Principal Place of Business:

15605 BAY VISTA DR
CLERMONT, FL 34714

Current Mailing Address:

15318 PETRUS LN
CLERMONT, FL 34711

New Mailing Address:

15605 BAY VISTA DR
CLERMONT, FL 34714

FEI Number: 04-3701621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, TIMOTHY S
15318 PETRUS LN
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

SULLIVAN, TIMOTHY S
15605 BAY VISTA DR
CLERMONT, FL 34714 US

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:

04/22/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SULLIVAN, TIMOTHY S
Address: 15318 PETRAS LN
City-St-Zip: CLERMONT, FL 34711

Title: MGR () Delete
Name: SULLIVAN, AMY N
Address: 15318 PETRAS LN
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SULLIVAN, TIMOTHY S
Address: 15605 BAY VISTA DR
City-St-Zip: CLERMONT, FL 34714

Title: MGR (X) Change () Addition
Name: SULLIVAN, AMY N
Address: 15605 BAY VISTA DR
City-St-Zip: CLERMONT, FL 34714

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: TIMOTHY S. SULLIVAN

MGR

04/22/2005

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