2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 09, 2005 08:00 AM Secretary of State

1. Entity Nam	MENT # L02000016) 	ecretary of State
1	e of Business 25TH SREET 32686	Mailing Address P.O. BOX 953 FAIRFIELD, FL 33	2634		T - - 	WAY WANTE 11878 WANTE 11888 11884 THEORY THEORY IN
C	OO NOT WRITE		SPA	CE	01192005 No Chg-LLC 4. FEI Number 75-3067233 5. Certificate of Status Desired	CR2E083 (10/03) Applied For Not Applicable \$5.00 Additional Fee Required
	6. Name and Address of Current	Registered Agent				*/
	ROSE 125TH SREET , FL 32686		· 		DO NOT W	
the obligat	named entity submits this statement folions of registered agent. Signature, typed or printed name of registered agent illing Fee is \$50.00 ue by May 1, 2005	<u>-</u>	معدد ہد ۔ سے –	ed office or register	<u> </u>	Florida. I am familiar with, and accept
9.	MANAGING MEMBE	RS/MANAGERS	<u> </u>	<u></u>	- · · · · · · · · · · · · · · · · · · ·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PICKETT, JOHN 9450 NW 125TH ST REDDICK, FL 32686 MGRM PICKETT, ROSE 9450 NW 125TH ST REDDICK, FL 32686				Unogag 02/09/05-	221285 80028-014 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			· · · · · ·		DO_NOT_V	
NAME STREET ADDRESS CITY-ST-ZIP TITLE	,				IN THIS S	PACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report tertue and accurate and that my 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 bustee empowered to execute this report as required by Chapter 608, Florida Statutes.

352-86/-

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Kose Pickett

2-7-05

4527

Daytime Phone #