2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2005
Secretary of State

DOCUMENT# L02000017003

Entity Name: TIBERTECH PROPERTIES, LLC

Current Principal Place of Business:

P.O. BOX 1836
TARPON SPRINGS, FL 34688 US

New Principal Place of Business:

P.O. BOX 358354
GAINESVILLE, FL 32635 US

Current Mailing Address:

P.O. BOX 1836
TARPON SPRINGS, FL 34688 US

New Mailing Address:

P.O. BOX 358354
GAINESVILLE, FL 32635 US

FEI Number: 02-0627878 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRICKLAND, DEBORAH A
102 DOGWOOD TRACE
TARPON SPRINGS, FL 34688 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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	HOFFMAN, ARLENE A	
Address:	588 WEST BARRYMORE DR	
City-St-Zip:	BEVERLY HILLS, FL 34465	
Title:	MGRM	( ) Delete
Name:	STRICKLAND, DEBORAH A	
Address:	102 DOGWOOD TRACE	
City-St-Zip:	TARPON SPRINGS, FL 34688 US	
Title:	MGRM	( ) Delete
Name:	STRICKLAND, JAMES B JR	
Address:	102 DOGWOOD TRACE	
City-St-Zip:	TARPON SPRINGS, FL 34688 US	
Title:	MGRM	( ) Delete
Name:	HOFFMAN, LOUIS E	
Address:	588 WEST BARRYMORE DR	
City-St-Zip:	BEVERLY HILLS, FL 34465 US	

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: DEBORAH A STRICKLAND MGRM 04/17/2005

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