

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020415

FILED  
Apr 18, 2005  
Secretary of State

Entity Name: MINDSWEEPER ENTERPRISES LLC

## Current Principal Place of Business:

500 WONDERWOOD DRIVE  
JACKSONVILLE, FL 32233

## New Principal Place of Business:

500 WONDERWOOD DRIVE  
#73  
JACKSONVILLE, FL 32233 US

## Current Mailing Address:

P.O. BOX 331059  
ATLANTIC BEACH, FL 323331059

## New Mailing Address:

P.O. BOX 331059  
ATLANTIC BEACH, FL 323331059 US

FEI Number: 45-0485859

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COPELAND, CHARLES H  
500 WONDERWOOD DRIVE  
JACKSONVILLE, FL 32233 US

## Name and Address of New Registered Agent:

COPELAND, CHARLES H  
500 WONDERWOOD DRIVE  
#73  
JACKSONVILLE, FL 32233 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:

04/18/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: COPELAND, CHARLES H  
Address: 500 WONDERWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 322331059

Title: MGRM ( ) Delete  
Name: COPELAND, JEANNINE M  
Address: 500 WONDERWOOD DRIVE  
City-St-Zip: JACKSONVILLE, FL 322331059

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: COPELAND, CHARLES H  
Address: 500 WONDERWOOD DRIVE, #73  
City-St-Zip: JACKSONVILLE, FL 322331059 US

Title: MGRM (X) Change ( ) Addition  
Name: COPELAND, JEANNINE M  
Address: 500 WONDERWOOD DRIVE, #73  
City-St-Zip: JACKSONVILLE, FL 322331059 US

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: CHARLES H. COPELAND

MR.

04/18/2005

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