2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2005
Secretary of State

DOCUMENT# L02000021467

Entity Name: OMS COBRA SERVICE, L.L.C.

Current Principal Place of Business:

202 N MASSACHUSETTS AVENUE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

202 N MASSACHUSETTS AVENUE
LAKELAND, FL 33801

New Mailing Address:

FEI Number: 54-2068984 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SALE, GREGORY
202 N MASSACHUSETTS AVENUE
LAKELAND, FL 33801 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:	MGR	( ) Delete
Name:	SALE, GREG	
Address:	202 N MASSACHUSETTS AVE	
City-St-Zip:	LAKELAND, FL 33801	
Title:	MGR	( ) Delete
Name:	MILES, JEFF	
Address:	202 N MASSACHUSETTS AVE	
City-St-Zip:	LAKELAND, FL 33801	
Title:	MGR	( ) Delete
Name:	CLEGHORN, BOB	
Address:	202 N MASSACHUSETTS AVE	
City-St-Zip:	LAKELAND, FL 33801	

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:	

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: BOB CLEGHORN MGR 02/09/2005

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