

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000022558

**FILED**  
**Jan 04, 2005**  
**Secretary of State**

**Entity Name:** LYBRITE LLC

**Current Principal Place of Business:**

730 OLD COACHMAN ROAD  
D-4  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

730 OLD COACHMAN ROAD  
D-4  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 75-3066615

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERRY, ROGER D  
730 OLD COACHMAN ROAD  
D-4  
CLEARWATER, FL 33765 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: PERRY, LYNN  
Address: 730 OLD COACHMAN RD., #D-4  
City-St-Zip: CLEARWATER, FL 33765

**ADDITIONS/CHANGES:**

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: LYNN PERRY

MGRM

01/04/2005

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