2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000024788

1. Entity Name 3191 HARBOR BLVD., L.L.C.



FILED Mar 18, 2005 08:00 AM **Secretary of State**

Principal Place of Business

3191 HARBOR BLVD., SUITE C PORT CHARLOTTE, FL 33952 Mailing Address

3191 HARBOR BLVD., SUITE C PORT CHARLOTTE, FL 33952



03142005No Chg-LLC

CR2E083 (10/03)

4. FEI Number Applied For 61-1426236 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

GASSMAN, ALAN S 1245 COURT STREET, SUITE 102 CLEARWATER, FL 33756

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

SIGNATURE:

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the obligations of registered agent.			
SIGNATURE	Signature, typed or orinted name of registerod agent and title if applicable,	(NOTE Registered Agent signature required when reinstalling)	OATE
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HODEL, RICK- RIGHARD 3191 HARBOR BLVD., SUITE C PORT CHARLOTTE, FL 33952		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		0	UNNOON269034 3/18/05-80068-011 55.00
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11. I hereby certify that the information supplied with this filling 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 is true 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

8. 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. I am familiar with, and accept