## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **DOCUMENT # L02000027112**

t. Entity Name BUILDING ONE, LLC



**FILED** Apr 28, 2005 08:00 AM Secretary of State

Principal Place of Business

4625 EAST BAY DR., STE. 201 CLEARWATER, FL 33764 US Mailing Address

4625 EAST BAY DR., STE. 201 CLEARWATER, FL 33764 US



DO NOT WRITE IN THIS SPACE

04162005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 57-1182880

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TYLER, SCOTT J 4625 EAST BAY DR STF 201

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CLEARWA	ATER, FL 33764	IN THIS SPACE							
	named entity submits this statement for the purpose of char tions of registered agent.	unging its registered office or registered agent, or both, in the State	of Florida. I am familiar with, and accept						
SIGNATURE_	Signature, typed or printed name of registered agont and title if applicable.	(NOTE: Registered Agont signature required when romatating)	DATE						
Fi D	iling Fee is \$50.00 ue by May 1, 2005								
9.	MANAGING MEMBERS/MANAGERS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TYLER, SCOTT J 4625 EAST BAY DR., STE. 201 CLEARWATER, FL 33764								
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE Name Street Address City-St-Zip		DO NOT	WRITE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS :	SPACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP									

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 flability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

EIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone i