2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# L02000032780

Entity Name: MY MACGUYS, LLC

Current Principal Place of Business:

115 112TH AVENUE NE
SUITE 705
ST. PETERSBURG, FL 33716 US

New Principal Place of Business:

1227 55TH AVE N
SAINT PETERSBURG, FL 33703 US

Current Mailing Address:

115 112TH AVENUE NE
SUITE 705
ST. PETERSBURG, FL 33716 US

New Mailing Address:

1227 55TH AVE N
SAINT PETERSBURG, FL 33703 US

FEI Number: 81-0600975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BEARDSLEY, NEIL A MR
115 112TH AVENUE NE
SUITE 705
ST. PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

BEARDSLEY, NEIL A MR
1227 55TH AVE N
SAINT PETERSBURG, FL 33703 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: NEIL A. BEARDSLEY 07/01/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BEARDSLEY, NEIL A MR
Address: 115 112TH AVE NE SUITE 705
City-St-Zip: ST. PETERSBURG, FL 33716 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BEARDSLEY, NEIL A MR
Address: 1227 55TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33703 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: NEIL A. BEARDSLEY MGR 07/01/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date