


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 16, 2005 8:00 am
Secretary of State

03-16-2005 90292 011 ****50.00

DOCUMENT # L02000033631	
1. Entity Name EASY STREET CAPITAL HOLDINGS, LLC	

Principal Place of Business 412 SEA SPRAY LN. PONTE VEDRA BEACH, FL 32082	Mailing Address PO BOX 535 PONTE VEDRA BEACH, FL 32004
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2. Principal Place of Business 520 S. Sea Lake Ln	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Ponte Vedra Bch, FL	City & State
Zip 32082	Country



03112005 Chg-LLC CR2E083 (10/03)

6. Name and Address of Current Registered Agent	
BOSCH, WAYNE 412 SEASPRAY LANE PONTE VEDRA BEACH, FL 32082	

4. FEI Number 55-0815238	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable) -	
City	FL Zip Code

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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent Signature required when rehashing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOSCH, WAYNE 412 SEA SPRAY LN. PONTE VEDRA BEACH, FL 32082 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: Wayne L Bosch Wayne Bosch 3/16/05 904-273-2707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #