

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L03000002226

1. Entity Name  
DOUGLAS PARTNERS, LLC



Principal Place of Business  
761 PINE TREE ROAD  
WINTER PARK, FL 32789

Mailing Address  
761 PINE TREE ROAD  
WINTER PARK, FL 32789

**FILED  
Apr 25, 2005 8:00 am  
Secretary of State**

04-25-2005 90106 037 \*\*\*\*50.00

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04142005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 55-0817502	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	HOEKSEMA, DOUGLAS A
STREET ADDRESS	400 PARK AVENUE SOUTH STE 220
CITY-ST-ZIP	WINTER PARK, FL 32789

TITLE	
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**DO NOT WRITE  
IN THIS SPACE**

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 recorder or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

4/20/05

Date

Daytime Phone #