2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2005
Secretary of State

DOCUMENT# L03000002358

Entity Name: CENTRAL FLORIDA FORMATIONS GROUP, L.L.C.

Current Principal Place of Business:

111 N. ORANGE AVE. SUITE 1200
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

111 N. ORANGE AVE. SUITE 1200
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 20-0894928 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORAN, BRIAN J ESQ.
111 N. ORANGE AVE. SUITE 1200
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	MORAN, BRIAN J	
Address:	111 N. ORANGE AVE. SUITE 1200	
City-St-Zip:	ORLANDO, FL 32801	
Title:	MGR	( ) Delete
Name:	SHAMS, SIDNEY H	
Address:	111 N. ORANGE AVE. SUITE 1200	
City-St-Zip:	ORLANDO, FL 32801	
Title:	MGR	( ) Delete
Name:	KIDD, JAMES F	
Address:	111 N. ORANGE AVE. SUITE 1200	
City-St-Zip:	ORLANDO, FL 32801	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: BRIAN J. MORAN MGR 03/31/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date