

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004443

Entity Name: SITE CONTROL, LLC

FILED  
Feb 08, 2005  
Secretary of State

## Current Principal Place of Business:

515 DIANE CIRCLE  
CASSELBERRY, FL 32707

## New Principal Place of Business:

1440 PARK SHORE CIRCLE  
SUITE 4  
FORT MYERS, FL 33901

## Current Mailing Address:

515 DIANE CIRCLE  
CASSELBERRY, FL 32707

## New Mailing Address:

1440 PARKSHORE CIRCLE  
SUITE 4  
FORT MYERS, FL 33901

FEI Number: 83-0349348

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SYSE, JAMES D  
515 DIANE CIRCLE  
CASSELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

SYSE, JAMES D  
1440 PARK SHORE CIRCLE  
SUITE 4  
FORT MYERS, FL 33901 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:

02/08/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: SYSE, JAMES D  
Address: 515 DIANE CIRCLE  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SYSE, JAMES D  
Address: 1440 PARK SHORE CIRCLE, SUITE 4  
City-St-Zip: FORT MYERS, FL 33901

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: JAMES D. SYSE

MGRM

02/08/2005

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