

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005417

FILED  
Apr 03, 2005  
Secretary of State

**Entity Name:** ERLANDSON AND TOWNE, LLC

**Current Principal Place of Business:**

4565 S. ATLANTIC AVENUE  
UNIT 5209  
PONCE INLET, FL 32127 US

**New Principal Place of Business:**

**Current Mailing Address:**

4565 S. ATLANTIC AVENUE  
UNIT 5209  
PONCE INLET, FL 32127 US

**New Mailing Address:**

**FEI Number:** 56-2346654

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEAVEY, FLORENCE D  
4565 S. ATLANTIC AVE.  
UNIT 5209  
PONCE INLET, FL 32127 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: SEAVEY, FLORENCE D  
Address: 4565 S. ATLANTIC AVENUE, UNIT 5209  
City-St-Zip: PONCE INLET, FL 32127 US

Title: MGRA ( ) Delete  
Name: MOORE, CALVIN L  
Address: P.O. BOX 84  
City-St-Zip: SLOAN, IA 51055

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: TOWNE, CALVIN L  
Address: P.O. BOX 84  
City-St-Zip: SLOAN, IA 51055

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: FLORENCE D SEAVEY

MGR

04/03/2005

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