2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L03000005800

1. Entity Name
HOWE TO, LLC

Principal Place of Business	Mailing Address
18110 CONSTITUTION CIR FORT MYERS, FL 33912 US	18110 CONSTITUTION CIR FORT MYERS, FL 33912 US

DO NOT WRITE IN THIS SPACE

03102005No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
30-0148858	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

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6. Name and Address of Current Registered Agent

SCHUMANN, RAYMOND L
C/O SCHUMANN LAW GROUP P.A.
27200 RIVERVIEW CENTER BLVD., SUITE 103
BONITA SPRINGS, FL 34134

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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	HOWE, TRENT
STREET ADDRESS	18110 CONSTITUTION CIRCLE
CITY-ST-ZIP	FORT MYERS, FL 33912

TITLE	MGR
NAME	MCGENNIS, DEBRA J
STREET ADDRESS	18110 CONSTITUTION CIRCLE
CITY-ST-ZIP	FORT MYERS, FL 33912

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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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: _Michael P. Jr_   3-10-05   239-949-4529

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #