


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90420 050 ****50.00

DOCUMENT # L03000006608 1. Entity Name HUNT CLUB BUSINESS CENTER LLC					
Principal Place of Business 491 N. STATE ROAD 434 SUITE 125 ALTAMONTE SPRINGS, FL 32714			Mailing Address P.O. BOX 160580 ALTAMONTE SPRINGS, FL 32716		
2. Principal Place of Business 2755 Border Lake Road Suite, Apt. #, etc. Suite 101 City & State Apopka, FL Zip 32703-4857		3. Mailing Address 2755 Border Lake Road Suite, Apt. #, etc. Suite 101 City & State Apopka, FL Zip 32703-4857		4. FEI Number 51-0450364 Applied For <input type="checkbox"/> Not Applicable	
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent KANAGA, MERIDYTHE 491 N. STATE ROAD 434 SUITE 125 ALTAMONTE SPRINGS, FL 32714			7. Name and Address of New Registered Agent Name Meridythe Kanaga Street Address (P.O. Box Number is Not Acceptable) 2755 Border Lake Road Suite 101 City Apopka		
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.			DATE		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE		
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KANAGA, MERIDYTHE 491 N. STATE ROAD 434, SUITE 125 ALTAMONTE SPRINGS, FL 32714	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM P 2755 Border Lake Road, Suite 101 Apopka, FL 32703-4857
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KANAGA, RICK 491 N. STATE ROAD 434, SUITE 125 ALTAMONTE SPRINGS, FL 32714	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM S/T 2755 Border Lake Road, Suite 101 Apopka, FL 32703-4857
		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
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		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM 	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: Meridythe Kanaga Meridythe Kanaga 3/31/05 407-862-2292					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

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