

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90157 049 ****50.00

DOCUMENT # L03000007092

1. Entity Name
KNOWLEDGEABLE DECISIONS, LLC



Principal Place of Business
138 VINTAGE ISLE LANE
PALM BEACH GARDENS, FL 33418

Mailing Address
138 VINTAGE ISLE LANE
PALM BEACH GARDENS, FL 33418



01312005 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
55-0823042

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~SMALL, CHRISTINE M ESQ.~~ *CHRISTINE M. ROBBINS, ESQ*
BUTZEL LONG
1200 N. FEDERAL HIGHWAY, SUITE 420
BOCA RATON, FL 33432

**DO NOT WRITE
IN THIS SPACE**

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

Christine M. Robbins
Signature, typed or printed name of registered agent and title if applicable.

2/17/05
DATE

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
DAWES, KAREN T
138 VINTAGE ISLE LANE
PALM BEACH GARDENS, FL 33418

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

K Daves
Date
2/14/05 5616919702
Daytime Phone #