

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009097

FILED  
Sep 06, 2005  
Secretary of State

**Entity Name:** FLEERSCAPE MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

6111 SAVOY CIRCLE  
LUTZ, FL 33558

**New Principal Place of Business:**

**Current Mailing Address:**

6111 SAVOY CIRCLE  
LUTZ, FL 33558

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

JOHNSON, LEONARD H  
37837 MERIDIAN AVENUE  
SUITE 314  
DADE CITY, FL 33525 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FLEER, KENNETH E  
Address: 6111 SAVOY CIRCLE  
City-St-Zip: LUTZ, FL 33558

**ADDITIONS/CHANGES:**

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

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: KENNETH E. FLEER

MGRN

09/06/2005

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