


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000010732

1. Entity Name
EEL RACING PARTNERS, L.L.C.



Principal Place of Business 262 ANTIGUA DRIVE COCOA BEACH, FL 32931	Mailing Address 262 ANTIGUA DRIVE COCOA BEACH, FL 32931
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DO NOT WRITE IN THIS SPACE



08032005No Chg-LLC CR2E083 (10/03)

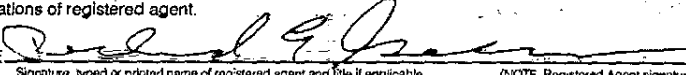
4. FEI Number 54-2108297	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**MOSLEY, CURTIS R
 1221 EAST NEW HAVEN AVENUE
 MELBOURNE, FL 32901**

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  **Richard E. George 8-4-05**

Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

Filing Fee is \$50.00 Due by September 7, 2005

U00000375808
 08/08/05-80003-004 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BIERY, RICHARD 1825 MINUTEMENT CAUSEWAY COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CASTILLO, RICHARD 300 BANANA RIVER BLVD. COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GEORGE, RICHARD E 262 ANTIGUA DRIVE COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RINGDAHL, DANNY 750 N. ATLANTIC AVENUE #1209 COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STOTTLER, RICHARD 8680 N. ATLANTIC AVENUE CAPE CANAVERAL, FL 32920
TITLE NAME STREET ADDRESS 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:  **8-04-05 321-452-8788**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Day/Even Phone #