

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012573

Entity Name: WEST SIDE AQUARIUM, LLC

FILED
Jan 10, 2005
Secretary of State

Current Principal Place of Business:

4328 S. MANHATTAN AVE.
TAMPA, FL 33611

New Principal Place of Business:

3409 S. DALE MABRY HIGHWAY
TAMPA, FL 33629

Current Mailing Address:

1314 STATE ROAD 60 WEST
PLANT CITY, FL 335679282

New Mailing Address:

FEI Number: 59-1925825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, PHYLLIS K
1314 STATE ROAD 60 WEST
PLANT CITY, FL 335679282 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGRM () Delete
Name: MARTIN, PHYLLIS K
Address: 1314 STATE ROAD 60 WEST
City-St-Zip: PLANT CITY, FL 335679282 US

Title: MGRM () Delete
Name: MARTIN, CHARLES M
Address: 1314 STATE ROAD 60 WEST
City-St-Zip: PLANT CITY, FL 335679282 US

Title: MGRM () Delete
Name: MARTIN, PAUL D
Address: 116 HIDDEN LAKE DRIVE
City-St-Zip: BRANDON, FL 33511 US

ADDITIONS/CHANGES:

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

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

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: PHYLLIS K. MARTIN

MGRM

01/10/2005

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