## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

## FILED Apr 30, 2005 08:00 AM Secretary of State **DOCUMENT # L03000012773** 1. Entity Name MOE'S EDGEWATER, LLO Mailing Address Principal Place of Business 232 SOUTH DILLARD ST. 232 SOUTH DILLARD ST. WINTER GARDEN, FL 34787 WINTER GARDEN, FL 34787 03242005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 57-1161645 \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE MILHAUSEN, JEFFREY P ESQ MILLER, SOUTH, MILHAUSEN & CARR, P.A. 2699 LEE ROAD, STE. 120 IN THIS SPACE WINTER PARK, FL 32789 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 famillar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE DELISLE, STEVEN A NAME 232 SOUTH DILLARD ST. STREET ADDRESS CMY-ST-ZIP WINTER GARDEN, FL 34787 U00000350144 TITLE 05/02/05-80092-020 50.00 NAME BURDICK, MIKE 232 SOUTH DILLARD ST. STREET ADDRESS CITY-ST-ZIP WINTER GARDEN, FL 34787 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP ክኪፎ NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIF 11. I hereby certify that the information supplied with this filling 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.

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

407-395-0001