

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000014218 1. Entity Name PERFORMANCE PRIORITIES, LLC	
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Principal Place of Business 2346 EAST DRUID ROAD LOT 1211 CLEARWATER, FL 33764 US	Mailing Address 2346 EAST DRUID ROAD LOT 1211 CLEARWATER, FL 33764 US
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DO NOT WRITE IN THIS SPACE

01172005No Chg-LLC	CR2E083 (10/03)
4. FEI Number 06-1690180	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

SCHADE, JUDITH A
 2346 EAST DRUID ROAD
 LOT 1211
 CLEARWATER, FL 33764

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

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

1100000282715
 03/31/05-80053-018 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SCHADE, JUDITH A 2346 EAST DRUID ROAD LOT 1211 CLEARWATER, FL 33764
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: Judith A. Schade Date: March 27, 2005 Daytime Phone #: 27-460-2862
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE