

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000014982

Entity Name: MOXY TRADING LLC

FILED
Jul 13, 2005
Secretary of State

Current Principal Place of Business:

13700-2 SIX MILE CYPRESS PARKWAY
FT. MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

13700-2 SIX MILE CYPRESS PARKWAY
FT. MYERS, FL 33912

New Mailing Address:

FEI Number: 56-2352170 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

LUCAS, ROBERT R
13700-2 SIX MILE CYPRESS PARKWAY
FT. MYERS, FL 33912 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/MANAGERS:

Title: D () Delete
Name: LUCAS, ROBERT
Address: 13700 SIX MILE CYPRESS PKWY, STE 2
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: NORTHROP, MARK
Address: 13700 SIX MILE CYPRESS PKWY, STE 2
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: LUCAS, ROBERT R
Address: 6517 HIGHCROFT DRIVE
City-St-Zip: NAPLES, FL 34119

Title: GM (X) Change () Addition
Name: HERMAN, DAVID K
Address: 9180 THE LANE
City-St-Zip: NAPLES, FL 34109

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: ROBERT R. LUCAS

PRES

07/13/2005

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