


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000015605
 1. Entity Name
 MANAGEMENT TRUST ASSOCIATES, L.L.C.



Principal Place of Business Mailing Address
 3318 DR. M.L. KING ST. N. 3318 DR. M.L. KING ST. N.
 ST. PETERSBURG, FL 33704 ST. PETERSBURG, FL 33704



02182005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 37-1465355 Applied For Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 NICHOLAS F. LANG, P.A.
 5001 FOURTH STREET NORTH, SUITE A
 ST. PETERSBURG, FL 33703

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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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BOGUE, K. MARK 3318 DR. M.L. KING ST. N ST. PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BURKE, CHRISTOPHER A 3318 DR. M.L. KING ST. N ST. PETERSBURG, FL 33704
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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 606, Florida Statutes.

SIGNATURE: [Signature] 2-22-05 727-898-7535
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #