#### 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000017423

Entity Name

SIGNATURE:

SIGNATURE AND TYPED OR

ROLLING STONES, L.L.C.



Principal Place of Business

15868 SILVERADO COURT\_S.W. FORT MYERS, FL 33908\_

Mailing Address

15868 SILVERADO COURT S.W. FORT MYERS, FL 33908

### FILED Jan 21, 2005 08:00 AM Secretary of State



#### DO NOT WRITE IN THIS SPACE

01152005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 86-1092262 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

RICE, J. JEFFREY GOLDSTEIN, BUCKLEY, CECHMAN, RICË & PURTZ 1515 BROADWAY FORT MYERS, FL 33901

# DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and title # applicable	(NOTE Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS	The state of the s	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RICE, J. JEFFREY 1515 BROADWAY FORT MYERS, FL 33901		-N0000189632 01/24/05-80104-002 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u>·</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY - ST - ZIP		IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 truster expowered to execute this report as required by Chapter 608, Florida Statutes.			

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE