## **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## Mar 15, 2005 8:00 am Secretary of State 03-15-2005 90350 003 \*\*\*\*50.00 **DOCUMENT # L03000017863** Principal Place of Business Mailing Address 20021098 **659 NANDINA DRIVE** 659 NANDINA DRIVE WESTON, FL 33327 WESTON, FL 33327 03042005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARSHALL, GARY DO NOT WRITE 659 NANDINA DRIVE WESTON, FL 33327 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, 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 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME ERIC, SCHUMMER STREET ADDRESS 659 NANDINA DRIVE CITY-ST-7IP WESTON, FL 33327 TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE -NAMF -STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP Apr. 19 D. C. TITLE . 7:56 NAMES : 12.0 STREET ADDRESS CITY-ST-ZIP 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. Schummer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE

FILED

Daytime Phone #