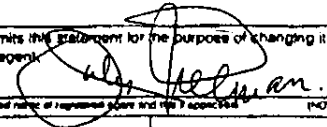
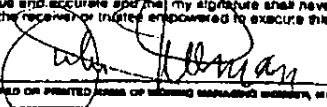


FILED
Apr 07, 2005 8:00 am
Secretary of State

04-07-2005 90095 002 ****50.00

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT			
DOCUMENT # L03000019208			
1. Entity Name 1000 BOOKS, LLC			
Principal Place of Business 7080 FAIRWAY BEND CIRCLE SARASOTA, FL 34243 10100 Cypress Cove DR #471		Mailing Address 7080 FAIRWAY BEND CIRCLE SARASOTA, FL 34243 ↓	
2. Principal Place of Business Suite, Apt. #, etc. # 471		3. Mailing Address 10100 Cypress Cove DR Suite, Apt. #, etc. # 471	
City & State Ft. Myers, FL		City & State Ft. Myers, FL	
Zip 33908	Country U.S.A.	Zip 33908	Country U.S.A.
4. Name and Address of Current Registered Agent FREEMAN, PAUL H 1840 WEST 48TH STREET SUITE 410 MIALEAH, FL 33012		5. Name and Address of New Registered Agent Name: Jules Freeman Street Address (P.O. Box Number is Not Acceptable) 10100 Cypress Cove Drive #471 City: Ft. Myers FL Zip Code: 33908	
6. 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: This and Agent signature required when re-issuing)			
Filing Fee is \$60.00 Due by May 1, 2004		Make check payable to Florida Department of State	
8. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM FREEMAN, JULES 10100 Cypress Cove DR. 7080 FAIRWAY BEND CIRCLE SARASOTA, FL 34243 #471 Ft. Myers, FL 33908 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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:  JULES FREEMAN		Date: 4/10/2005 (239)-415-4659	