

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019490

Entity Name: LEVY TIMBER, LLC

FILED  
Jan 10, 2005  
Secretary of State

## Current Principal Place of Business:

6753 GARDEN ROAD  
SUITE 109  
RIVIERA BEACH, FL 33404 US

## New Principal Place of Business:

## Current Mailing Address:

6753 GARDEN ROAD  
SUITE 109  
RIVIERA BEACH, FL 33404 US

## New Mailing Address:

FEI Number: 43-2021321      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BURNEY, JAMES L JR  
6753 GARDEN ROAD SUITE 109  
RIVIERA BEACH, FL 33404 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/MEMBERS:

Title: MGR ( ) Delete  
Name: BURNEY, JAMES L JR  
Address: 8647 SE OLEANDER STREET  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete  
Name: OLSON, TODD J  
Address: 4025 ILEX CIRCLE NORTH  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: MGRM ( ) Delete  
Name: GILLENWALTERS, SHARON L  
Address: 157 JANICE DRIVE  
City-St-Zip: HOLLISTER, FL 32147 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: GILLENWALTERS, SHARON L  
Address: 1308 SW HUNNICUT AVE  
City-St-Zip: PORT ST LUCIE, FL 34953 US

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: SHARON GILLENWALTERS

MGRM

01/10/2005

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