2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 25, 2005 08:00 AM Secretary of State

DOCUMENT # L03000019545 1. Entity Name HIGHWAY 17, L.L.C.		-		Secretary of State
Principal Place of Business Mailing Address 1133 BAL HARBOR BLVD., STE 1129 PUNTA GORDA, FL 33950 PUNTA GORDA, FL 33950 Mailing Address 1133 BAL HARBOR BLVD., STE 1129 PUNTA GORDA, FL 33950				
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent				04142005 No Chg-LLC
BEVIS, J. LYN 1133 BAL HARBOR BLVD., STE 1129 PUNTA GORDA, FL 33950				DO NOT WRITE IN THIS SPACE
B. 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. Hyped or printed name of registered agent and life if applicable [NOTE. Registated Agent signature required when reinstating) DATE				
Filing Feo is \$50.00 Due by May 1, 2005				
9.	MANAGING MEMBER	RS/MANAGERS]	· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGR BEVIS, J. LYN 1133 BAL HARBOR BLVD., STE PUNTA GORDA, FL 33950	1129	i	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			_	1/00000329370 04/25/05-80113-019 50.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<u>-</u>	IN THIS SPACE
TITLE MAME STREET ADDRESS GITY - ST - ZIP				
NAME STREET ADDRESS CITY-ST-ZIP		· — • • • • • • • • • • • • • • • • • •		<u> </u>
11. I heroby 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 regal 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 people as required by Chapter 608. Florida Statutes.				