

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021009

FILED
Apr 11, 2005
Secretary of State

Entity Name: TOUCHDOWN XTREMECLEAN, LLC

Current Principal Place of Business:

5605 FLORIDA MINING BLVD. S.
SUITE 207
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 600442
JACKSONVILLE, FL 32260

New Mailing Address:

FEI Number: 51-0471042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFIELD, J. HOWARD ESQ
J. HOWARD SHEFFIELD, P.A.
4209 BAYMEADOWS ROAD, STE. 4
JACKSONVILLE, FL 32217 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: HOUSE, ROY F III
Address: 5605 FLORIDA MINING BLVD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGR () Delete
Name: HOUSE, PATRICIA
Address: 5605 FLORIDA MINING BLVD. S.
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGR () Delete
Name: FENNIMORE, CLAY
Address: 5605 FLORIDA MINING BLVD. S.
City-St-Zip: JACKSONVILLE, FL 32257

Title: MGR () Delete
Name: FENNIMORE, TERESA
Address: 5605 FLORIDA MINING BLVD. S.
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES:

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

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

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

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

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: PATRICIA J HOUSE

MGR

04/11/2005

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