

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000023338

1. Entity Name  
PROSPERITY EXPANSION GROUP, LLC



Principal Place of Business  
141 FERNERY RD. #20 (C-4)  
LAKELAND, FL 33809

Mailing Address  
141 FERNERY RD. #20 (C-4)  
LAKELAND, FL 33809



04082005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
04-3771571

☐ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

BERRY, FRANKLYN G  
141 FERNERY RD. #20 (C-4)  
LAKELAND, FL 33809

**DO NOT WRITE  
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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	BERRY, FRANKLIN G
STREET ADDRESS	141 FERNERY RD # 20 (C-4)
CITY-ST-ZIP	LAKELAND, FL 33809
TITLE	MGRM
NAME	PAWLOWSKI, PATRICIA A
STREET ADDRESS	141 FERNERY RD. #20 (C-4)
CITY-ST-ZIP	LAKELAND, FL 33809
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

0000000005766  
74/14/05-80099-010 50.00

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE:

*[Signature]*

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

4/10/05 (863) 858-0235

Date

Daytime Phone #