

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024852

Entity Name: C 4 DIRECT, LLC

FILED
Apr 05, 2005
Secretary of State

Current Principal Place of Business:

2520 N. POWERLINE ROAD, SUITE 303
POMPANO, FL 33069

New Principal Place of Business:

555 SW 12TH AVE.
SUITE 210
POMPANO, FL 33069

Current Mailing Address:

2520 N. POWERLINE ROAD, SUITE 303
POMPANO, FL 33069

New Mailing Address:

555 SW 12TH AVE.
SUITE 210
POMPANO, FL 33069

FEI Number: 68-0565476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BDB AGENT CO.
2500 N. MILITARY TRAIL, SUITE 480
BOCA RATON, FL 33431 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: MGRM () Delete
Name: THIBEAU, RONALD W COO
Address: 11555 WINDSOR BAY PLACE
City-St-Zip: WELLINGTON, FL 33467

Title: MGRM () Delete
Name: THIBEAU, CANDY VP
Address: 11555 WINDSOR BAY PLACE
City-St-Zip: WELLINGTON, FL 33467

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: THIBEAU, RONALD W COO
Address: 9270 DELMAR CRT
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM (X) Change () Addition
Name: THIBEAU, CANDY VP
Address: 9270 DELMAR CRT.
City-St-Zip: WELLINGTON, FL 33414

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: RAQUEL FASCIANI

MGR

04/05/2005

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