

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000025564

FILED  
Jan 15, 2005  
Secretary of State

Entity Name: WEBB RELOCATION SPECIALIST, LLC

**Current Principal Place of Business:**

2150 LAKE IDA ROAD  
SUITE 5  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

2150 LAKE IDA ROAD  
SUITE 5  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number: 20-2165946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BERKMAN, KATRINA A  
2150 LAKE IDA ROAD  
SUITE 5  
DELRAY BEACH, FL 33445 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: WEBB, JOHN E JR.  
Address: 2150 LAKE IDA ROAD  
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR ( ) Delete  
Name: BERKMAN, KATRINA A  
Address: 2150 LAKE IDA ROAD SUITE 5  
City-St-Zip: DELRAY BEACH, FL 33445

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BERKMAN, KATRINA A  
Address: 2150 LAKE IDA ROAD #5  
City-St-Zip: DELRAY BEACH, FL 33445

Title: MGR (X) Change ( ) Addition  
Name: WEBB JR, JOHN E  
Address: 2150 LAKE IDA #5  
City-St-Zip: DELRAY BEACH, FL 33445

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: KATRINA A BERKMAN

MGR

01/15/2005

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