

2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000025564

FILED
Jan 31, 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:** 20-0086678**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: BERKMAN, KATRINA A
Address: 2150 LAKE IDA ROAD #5
City-St-Zip: DELRAY BEACH, FL 33445**Title:** MGR () Delete
Name: WEBB JR, JOHN E
Address: 2150 LAKE IDA #5
City-St-Zip: DELRAY BEACH, FL 33445**ADDITIONS/CHANGES:****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: KATRINA A BERKMAN

MGR

01/31/2005

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