

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027615

FILED  
Jan 31, 2005  
Secretary of State

Entity Name: GRAPHARMIX PARTNERS, LLC

## Current Principal Place of Business:

453 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

200 VIA DE LAGO  
SUITE B  
ALTAMONTE SPRINGS, FL 32701 US

## Current Mailing Address:

453 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779 US

## New Mailing Address:

200 VIA DE LAGO  
SUITE B  
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CROFTS, MICHAEL L  
453 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

COLE, BRAD A  
200 VIA DE LAGO  
SUITE B  
ALTAMONTE SPRINGS, FL 32701 US

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: BRAD A. COLE

01/31/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: COLE, BRADLEY  
Address: 523 SADDLEWOOD LANE  
City-St-Zip: WINTER PARK, FL 32708 US

Title: MGRM ( ) Delete  
Name: CROFTS, MICHAEL L  
Address: 453 TWISTING PINE CIRCLE  
City-St-Zip: LONGWOOD, FL 32779 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: COLE, BRADLEY  
Address: 200 VIA DE LAGO  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

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

Title: MGRM ( ) Change (X) Addition  
Name: WALKER, DAVE E JR.  
Address: 200 VIA DE LAGO  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

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: DAVE WALKER, JR.

OWNE

01/31/2005

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