

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030107

FILED
Jul 22, 2005
Secretary of State

Entity Name: ILLUMINATIONS STATION, L.L.C.

Current Principal Place of Business:

130 8TH AVENUE SOUTH
SAFETY HARBOR, FL 34695

New Principal Place of Business:

Current Mailing Address:

130 8TH AVENUE SOUTH
SAFETY HARBOR, FL 34695

New Mailing Address:

FEI Number: 20-0149456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

LANE, JANET R
1221 16TH CIRCLE SE
LARGO, FL 33771 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LANE, JANET R
Address: 1221 16TH CIRCLE SE
City-St-Zip: LARGO, FL 33771

Title: MGR () Delete
Name: SPICER, BONITA
Address: 346 6TH AVE N
City-St-Zip: SAFETY HARBOR, FL 34695

Title: MGR () Delete
Name: THIGPEN, CRYSTAL L
Address: 1221 SALTWATER BLVD
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES:

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

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: CRYSTAL L.W. THIGPEN

MRS.

07/22/2005

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