2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000031332

1. Entity Name
NORTH FORK TRADING COMPANY, LLC

Principal Place of Business	Mailing Address
3401 OLEANDER AVENUE FORT PIERCE, FL 34982	P.O. BOX 2547 FT. PIERCE, FL 34954

DO NOT WRITE IN THIS SPACE

02222005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
31-1826755	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

NEILL, RICHARD V JR.
311 SOUTH SECOND STREET, SUITE 200
FORT PIERCE, FL 34950

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature typed or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	NEILL, JAMES DAVID
STREET ADDRESS	3401 OLEANDER AVE.
CITY-ST-ZIP	FORT PIERCE, FL 34982
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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02/28/05-80070-006 50.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____   2/25/05   772-464-2061

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #