2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 28, 2005 08:00 AM Secretary of State

ANNUAL REPORT			Mar 28, 2005 08:00	
1. Entity Nam	MENT # L03000032032		S	ecretary of Stat
	ee of Business Mailing Address ASS BRIDGE ROAD 692 SAWGRASS BRIDGE ROA 34292 VENICE, FL 34292	D	 	
DO NOT WRITE IN THIS SPACE		CE	03242005 No Chg-LLC 4. FEI Number 98-0405463	CR2E083 (10/03) Applied For Not Applicable
<u>.</u>			5. Certificate of Status Desired	Fee Required
 	6. Name and Address of Current Registered Agent	-	· · ·	,
DIGGS, EDWARD J 692 SAWGRASS BRIDGE ROAD VENICE, FL 34292			DO NOT W IN THIS SI	
	named entity submits this statement for the purpose of changing its registions of registered agent. Signature, typed or printed name of registered agent and this if applicable. (NOTE Regist	ared office or register		lorida. I am familiar with, and accept
Filing Fee is \$50.00 Due by May 1, 2005		U000 03/28/0	100279266 15-80060-005 50.00	
9.	MANAĞİNĞ MEMBERS/MANAĞERS		THE STATE OF THE PERSON OF THE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DIGGS, EDWARD J 692 SAWGRASS BRIDGE ROAD VENICE, FL 34292			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				<u>.</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT V	/RITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS S	PACE
TITLE NAME STREET ADDRESS				St. St. Company

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(7), 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:

TITLE

STREET ADDRESS CITY-ST-ZIP

3-34-2005 941412-1204

Daytime Phone #