2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L03000032993 1. Entity Name CHELUK, LLC



Principal Place of Business /

Mailing Address

1000 SHOREWOOD DR. CAPE CANAVERAL, FL 32920

309 LINDSEY CT. CAPE CANAVERAL, FL 32920

FILED Jan 24, 2005 8:00 am **Secretary of State**

01-24-2005 90104 024 ****50.00

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01112005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 20-0211638 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

JURKOVIC, VICKIE S 309 LINDSÉY CT. CAPE CANAVERAL, FL 32920

DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of change	ing its registered office o	r registered agent, or both	in the State of Florida.	I am familiar with, and	d 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)

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS			W.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JURKOVIC, VICKIE S 309 LINDSEY CT. CAPE CANAVERAL, FL 32920					
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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 reserver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGE

G MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #