

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035875

Entity Name: TOPPINO, LLC

FILED  
Feb 02, 2005  
Secretary of State

**Current Principal Place of Business:**

4880 N. HIGHWAY  
SUITE 100  
MT DORA, FL 32757

**New Principal Place of Business:**

4880 N. HIGHWAY 19A  
SUITE 100  
MT DORA, FL 32757

**Current Mailing Address:**

P.O. BOX 687  
MINNEOLA, FL 34755

**New Mailing Address:**

FEI Number: 30-0213979

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TOPPINO, PHILIP  
4880 N. HIGHWAY 19A SUITE 100  
MOUNT DORA, FL 32757 US

**Name and Address of New Registered Agent:**

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/MEMBERS:**

Title: PD ( ) Delete  
Name: TOPPINO, PHILIP M  
Address: PO BOX 687  
City-St-Zip: MINNEOLA, FL 34755

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: TOPPINO, PHILIP M  
Address: PO BOX 687  
City-St-Zip: MINNEOLA, FL 34755

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: PHILIP M TOPPINO

MGR

02/02/2005

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