

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035941

FILED
Apr 27, 2005
Secretary of State

Entity Name: THE LEATHERBACKS, LLC

Current Principal Place of Business:

14282 64TH DR. N.
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

14282 64TH DR. N.
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 03-0528953

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, KAREN E
14282 64TH DR. N.
PALM BEACH GARDENS, FL 33418 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: MGRM () Delete
Name: AMICARELLI, DANIEL
Address: 4521 PGA BLVD. #115
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM () Delete
Name: HARRIS, DEANNE L
Address: 600 UNO LAGO DR., APT. 201
City-St-Zip: JUNO BEACH, FL 33408

Title: MGRM () Delete
Name: SAVOCA, BRENDA K
Address: 1300 S. A1A, SUITE 319
City-St-Zip: JUPITER, FL 33477

Title: MGRM () Delete
Name: WHITE, BARBARA
Address: P. O. BOX 8001
City-St-Zip: JUPITER, FL 33468

Title: MGRM () Delete
Name: WILLIAMS, TREMETRA D
Address: 825 9TH ST.
City-St-Zip: W. PALM BEACH, FL 33401

Title: MGRM () Delete
Name: THOMAS, KAREN E
Address: 14282 64TH DR. N.
City-St-Zip: PALM BEACH GARDENS, FL 33418

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:

Title: () Change () Addition
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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: KAREN E. THOMAS

MGRM

04/27/2005

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