

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036796

**FILED**  
**Feb 12, 2005**  
**Secretary of State**

**Entity Name:** TOUCHSTONE INSTITUTE, LLC

**Current Principal Place of Business:**

5800 HOLLYWOOD BLVD. #114  
SARASOTA, FL 34231

**New Principal Place of Business:**

1269 FIRST STREET  
SUITE 7  
SARASOTA, FL 34236

**Current Mailing Address:**

5800 HOLLYWOOD BLVD. #114  
SARASOTA, FL 34231

**New Mailing Address:**

3773 PARKRIDGE CIRCLE  
SARASOTA, FL 34243

**FEI Number:** 20-0306592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOTKIN, WALTER W  
5800 HOLLYWOOD BLVD. #114  
SARASOTA, FL 34231 US

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

BOTKIN, WALTER W  
3773 PARKRIDGE CIRCLE  
SARASOTA, FL 34234 US

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: WALTER W. BOTKIN

02/12/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: BOTKIN, WALTER W  
Address: 5800 HOLLYWOOD BLVD. #114  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BOTKIN, WALTER W  
Address: 1269 FIRST ST., SUITE 7  
City-St-Zip: SARASOTA, FL 34236

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: WALTER W. BOTKIN

MGR

02/12/2005

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