

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039465

Entity Name: CHAMPIONS LEESBURG, LLC

FILED
Mar 02, 2005
Secretary of State

Current Principal Place of Business:

2408 W MAIN ST
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

3772 WEST COLONIAL DRIVE
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 75-3148778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUMPHRIES, J. GREGORY ESQ.
C/O SHUTTS & BOWEN LLP
300 SOUTH ORANGE AVENUE, SUITE 1000
ORLANDO, FL 328015403 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: MGR () Delete
Name: MEALEY, KEVIN
Address: 9413 GOTH A ROAD
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: MEALEY, DONALD C
Address: 9216 SLOANE ST.
City-St-Zip: ORLANDO, FL 32827

Title: ST () Delete
Name: LUMPKIN, JOHN
Address: 266 LEMON LILY CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: LUMPKIN, JOHN
Address: 266 LEMON LILY CT
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: DONALD C. MEALEY

MR

03/02/2005

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