

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039978

FILED
Jul 19, 2005
Secretary of State

Entity Name: SIMPLIFY, L.L.C.

Current Principal Place of Business:

110 GREENHAVEN TRAIL
OLDSMAR, FL 34677

New Principal Place of Business:

880 MANDALAY AVE
S-401
CLEARWATER BEACH, FL 33767

Current Mailing Address:

110 GREENHAVEN TRAIL
OLDSMAR, FL 34677

New Mailing Address:

880 MANDALAY AVE
S-401
CLEARWATER BEACH, FL 33767

FEI Number: 06-1458407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LAKHANI, NIVEDITA
110 GREENHAVEN TRAIL
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

LAKHANI, NIVEDITA
880 MANDALAY AVE
S-401
CLEARWATER BEACH, FL 33767 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: NIVEDITA LAKHANI

07/19/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LAKHANI, NIVEDITA
Address: 110 GREENHAVEN TRAIL
City-St-Zip: OLDSMAR, FL 34677

Title: MGR () Delete
Name: MASTER, ADARBAD
Address: 110 GREENHAVEN TRAIL
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LAKHANI, NIVEDITA
Address: 880 MANDALAY AVE, #S-401
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: MGR (X) Change () Addition
Name: MASTER, ADARBAD
Address: 880 MANDALAY AVE, #S-401
City-St-Zip: CLEARWATER BEACH, FL 33767

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: NIVEDITA LAKHANI

MS.

07/19/2005

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