

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041296

Entity Name: PTPC COMPANY, LLC

FILED
Feb 17, 2005
Secretary of State

Current Principal Place of Business:

909 SE 47TH TERRACE
SUITE 201
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

909 SE 47TH TERRACE
SUITE 201
CAPE CORAL, FL 33904 US

New Mailing Address:

FEI Number: 20-1089796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'BRIEN, TIM
909 SE 47TH TERRACE
SUITE 201
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

O'BRIEN, TIM
2204 SW 48TH TERRACE
CAPE CORAL, FL 33914 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: TIM O'BRIEN

02/17/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: O'BRIEN, TIM
Address: 909 SE 47TH TERRACE, SUITE 201
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MGR () Delete
Name: O'BRIEN, PATRICIA
Address: 909 SE 47TH TERRACE, SUITE 201
City-St-Zip: CAPE CORAL, FL 33904 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: O'BRIEN, TIM
Address: 2204 SW 48TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGR (X) Change () Addition
Name: O'BRIEN, PATRICIA
Address: 2204 SW 48TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

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: TIM O'BRIEN

MGR

02/17/2005

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