

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042340

Entity Name: EQUILLIANCE, LLC

FILED
Apr 07, 2005
Secretary of State

Current Principal Place of Business:

301 WEST S.R. 434, SUITE 319
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

301 WEST S.R. 434, SUITE 319
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 20-0359711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUMBERG, DAVID
301 WEST S.R. 434, SUITE 319
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

MATTINGLY, TIMOTHY
301 WEST S.R. 434, SUITE 319
WINTER SPRINGS, FL 32708 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: TIMOTHY MATTINGLY

04/07/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MOREAU, JOHN MR.
Address: 709 TIMBERWILDE AVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM (X) Delete
Name: BLUMBERG, DAVID MR.
Address: 286 DETMAR DR.
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Delete
Name: MAYS, WILLIAM MR.
Address: 2356 BUCKINGHAM RUN COURT
City-St-Zip: ORLANDO, FL 32828

Title: MGRM (X) Delete
Name: MATTINGLY, TIM MR.
Address: 2948 FITZTOOTH DRIVE
City-St-Zip: WINTER PARK, FL 32792

Title: MGRM () Delete
Name: VELA, JIM MR.
Address: 750 S. EDMON AVENUE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM (X) Delete
Name: ANDERSON, ADAM MR.
Address: 5646 SPRING RUN AVE.
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MATTINGLY, TIMOTHY MR.
Address: 2948 FITZTOOTH DRIVE
City-St-Zip: WINTER PARK, FL 32792

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
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: TIM MATTINGLY

PRES

04/07/2005

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