2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 18, 2005 08:00 AM Secretary of State

DOCUMENT # L03000043008 1. Entity Name YULARA, L.L.C.					Ü
7825 ALHAN	ee of Business MBRA DR, I, FL 34209	Mailing Address 7825 ALHAMBRA DR. BRADENTON, FL 34209			
DO NOT WRITE IN THIS SPACE			CE	01112005No Chg-LLC 4. FEI Number NOT APPLICABLE	CR2E083 (10/03) Applied For Not Applicable
	6. Name and Address of Current Re	aistered Agent		Certificate of Status Desired	\$5.00 Additional Fee Required
HEALEY, MAURICE I 7825 ALHAMBRA DR. BRANDENTON, FL 34209			DO NOT WRITE IN THIS SPACE		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if sophicable. (NOTE Pegistered Agent signature required when refrestating) DATE					
Filing Fee is \$50.00 Due by May 1, 2005					
9.	MANAGING MEMBERS	J/MANAGERS		and the second s	Commence of the second second second second
NAME STREET ADDRESS CITY - ST - ZIP	P HEALEY, MAURICE 7825 ALHAMBRA DRIVE BRADENTON, FL 34209				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEALEY, RENEE 7825 ALHAMBRA DRIVE BRADENTON, FL 34209			——————————————————————————————————————	184741 80042-015 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			 	DO NOT W	RITE
TITLE NAME STREET ADDRESS CITY- ST- ZIP			3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	IN THIS SPA	ACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Truther certify that the information indicated on this report is true and accurate and that my 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: 113-05 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Dayline Prome #					