


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 15, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000045910</b>		
1. Entity Name HUNTER TRAVEL MANAGEMENT LLC		
Principal Place of Business 4150 WOODLAND BOULEVARD NORTH PORT, FL 34286 US	Mailing Address 4150 WOODLAND BOULEVARD NORTH PORT, FL 34286 US	



04012005 No Chg-LLC CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0380404	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  HUNTER, JAN R 4150 WOODLAND BOULEVARD NORTH PORT, FL 34286	<b>DO NOT WRITE IN THIS SPACE</b>
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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 JAN R. HUNTER JAN R. HUNTER 4-11-05  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUNTER, JAN R 4150 WOODLAND BOULEVARD NORTH PORT, FL 34286
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STUART, MARY G 4150 WOODLAND BOULEVARD NORTH PORT, FL 34286
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04/16/05-80005-024 50.00

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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. I further 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: MARY STUART MARY STUART 4-11-05 941 4298804  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #