

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046209

FILED  
Apr 21, 2005  
Secretary of State

**Entity Name:** BEN & JEANNIE ELLIS, REAL ESTATE BROKERS, P.L.

**Current Principal Place of Business:**

6411 N.E. 20TH WAY  
FORT LAUDERDALE, FL 333081324

**New Principal Place of Business:**

**Current Mailing Address:**

6411 N.E. 20TH WAY  
FORT LAUDERDALE, FL 333081324

**New Mailing Address:**

**FEI Number:** 58-2678029

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD. #221E  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

ELLIS, JEANNIE MGRM  
6411 NE 20TH WAY  
FORT LAUDERDALE, FL 33308 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: JEANNIE ELLIS

04/21/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ELLIS, BEN  
Address: 6411 N.E. 20TH WAY  
City-St-Zip: FORT LAUDERDALE, FL 333081324

Title: MGRM ( ) Delete  
Name: ELLIS, JEANNIE  
Address: 6411 N.E. 20TH WAY  
City-St-Zip: FORT LAUDERDALE, FL 333081324

**ADDITIONS/CHANGES:**

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: JEANNIE ELLIS

MGRM

04/21/2005

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