## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

STRUET ADDRESS CITY-ST-ZIP

## Secretary of State **DOCUMENT # L03000046260** 1. Entity Name FRANK J PHILLIPS LLC Mailino Address Principal Place of Business 90154 OVERSEAS HWY 90154 OVERSEAS HWY TAVERNIER, FL 33070 TAVERNIER, FL 33070 CR2E083 (10/03) 02212005No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 55-0852500 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE PHILLIPS, FRANK J 90154 OVERSEAS HWY IN THIS SPACE TAVERNIER, FL 33070 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, typed or printed name of registered agent and title if applicable. INOTE: Registered Agent signature required when reinstaling) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM THE PHILLIPS, FRANK J MAME 90154 OVERSEAS HWY #2 STREET ADDRESS TAVERNIER, FL 33070 CTIY-ST-71P U00000248858 7m F : 4/02/05-80046-021 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-S1-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling 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 fimited liability company or the receiver or trustee empowered to execute this report as required by Chapter 609, Florida Statutes.

OR AUTHORIZED REPRESENTATIV

**FILED** 

Mar 02, 2005 08:00 AM