

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046605

Entity Name: JAMES MADDEN, LLC

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

11409 LOCKWOOD
LEESBURG, FL 34748 US

New Principal Place of Business:

11409 LOCKWOOD ST
LEESBURG, FL 34788 US

Current Mailing Address:

11409 LOCKWOOD
LEESBURG, FL 34748 US

New Mailing Address:

11409 LOCKWOOD ST
LEESBURG, FL 34788 US

FEI Number: 20-0414955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MADDEN, JAMES
11409 LOCKWOOD
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

MADDEN, JAMES
11409 LOCKWOOD ST
LEESBURG, FL 34788 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:

04/30/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MADDEN, JAMES
Address: 11409 LOCKWOOD
City-St-Zip: LEESBURG, FL 34748 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MADDEN, JAMES
Address: 11409 LOCKWOOD ST
City-St-Zip: LEESBURG, FL 34788 US

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: JAMES MADDEN

MGRM

04/30/2005

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