


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000046887 1. Entity Name DANIEL THOMAS WARREN LLC	
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Principal Place of Business 1440 CORAL RIDGE DR #104 CORAL SPRINGS, FL 33071	Mailing Address 1440 CORAL RIDGE DR #104 CORAL SPRINGS, FL 33071
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DO NOT WRITE IN THIS SPACE



04142005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-2677064	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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5. Name and Address of Current Registered Agent

**WARREN, DANIEL T
1440 CORAL RIDGE DR #104
CORAL SPRINGS, FL 33071**

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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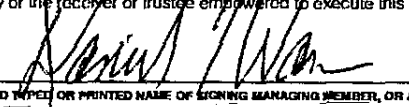
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WARREN, DANIEL T 1440 CORAL RIDGE DR #107 CORAL SPRINGS, FL 33071
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U00000318200
04/20/05-80044-024 50.00

**DO NOT WRITE
IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE:  4/15/05 954 290 9147	Date	Daytime Phone #
<small>SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		