


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90040 010 ****55.00

DOCUMENT # L03000049589
 1. Entity Name
 ROBERT B. COMLY, LLC



Principal Place of Business
 6101 BRIDLEFORD DR
 WESLEY CHAPEL, FL 33544 US

Mailing Address
 6101 BRIDLEFORD DR
 WESLEY CHAPEL, FL 33544 US

*9818 Preakness Stakes Way
 Dade City, FL 33525*

DO NOT WRITE IN THIS SPACE



01032005No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0449050	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

COMLY, ROBERT B
 6101 BRIDLEFORD DR.
 WESLEY CHAPEL, FL 33544

Robert B. Comly, ~~ESB~~
 9818 Preakness Stakes Way
 Dade City, FL 33525
 -CRC026341-

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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: *Robert B. Comly* Robert B. Comly MGRM DATE: 4-16-05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COMLY ROBERT B 6101 BRIDLEFORD DR. WESLEY CHAPEL, FL 33544
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Robert B. Comly, ESB 9818 Preakness Stakes Way Dade City, FL 33525 -CRC026341-
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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: *Robert B. Comly* Robert B. Comly MGRM DATE: 4-16-05 DAYTIME PHONE #: 352-567-3717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #