2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT **FILED DOCUMENT # L03000050822** Feb 09, 2005 08:00 AM 1. Entity Name B & T HOLDINGS, LL& Secretary of State Principal Place of Business Mailing Address **153 PACIFIC AVENUE 153 PACIFIC AVENUE** CLERMONT, FL 34711 CLERMONT, FL 34711 CR2E083 (10/03) 01132005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent GRIFFITHS, BARRY R JR DO NOT WRITE **153 PACIFIC AVENUE** CLERMONT, FL 34711 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 U000000222546 82/18/65 80065 818 50,68 MANAGING MEMBERS/MANAGERS 9 MGRM TILE GRIFFITHS, BARRY R JR NAME **153 PACIFIC AVENUE** STREET ADDRESS CITY-ST-ZIP CLERMONT, FL 34711 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 AND TYPED OR SHINTED MAKE OF SIGNING MANAGING MEMBER, ON AUTHORIZED REPRESENTATIVE

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