

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 13, 2005 8:00 am
Secretary of State

05-13-2005 90047 021 ****50.00

20030743



03102005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
74-2930253

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CHRITTON, CHARLES P
C/O WENDEL & CHRITTON, CHARTERED
5300 SOUTH FLORIDA AVENUE
LAKELAND, FL 33813

**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 _____

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**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BARCLAY, DONALD H
STREET ADDRESS	2012 LAKE BENTLEY COURT
CITY - ST - ZIP	LAKELAND, FL 33803
TITLE	MGRM
NAME	GARD, MARK J
STREET ADDRESS	3730 NEW TAMPA HIGHWAY
CITY - ST - ZIP	LAKELAND, FL 33815
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/10/05

Date

863-709-9090

Daytime Phone #

DONALD H BARCLAY