

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 22, 2005  
Secretary of State**

DOCUMENT# L03000053352

Entity Name: WAYNE KROLL, LLC

**Current Principal Place of Business:**

4032 MOORES LAKE ROAD  
DOVER, FL 33527

**New Principal Place of Business:**

**Current Mailing Address:**

4032 MOORES LAKE ROAD  
DOVER, FL 33527

**New Mailing Address:**

FEI Number: 20-0497581      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KROLL, WAYNE  
4032 MOORES LAKE ROAD  
DOVER, FL 33527    US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

Title:            MGRM      ( ) Delete  
Name:            CECIL, WAYNE  
Address:        21032 MOCRES RD  
City-St-Zip:    DOVER, FL 33527

**ADDITIONS/CHANGES:**

Title:            MGR      (X) Change ( ) Addition  
Name:            KROLL, WAYNE D PR  
Address:        4032 MOORES LAKE RD  
City-St-Zip:    DOVER, FL 33527

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: WAYNE KROLL

MGR

04/22/2005

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