2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 05, 2005 08:00 AM DOCUMENT # L03000053459 **Secretary of State** GET TO WORK - GTW, LTD. CO. Principal Place of Business Mailing Address 774 DRIFTWOOD CIRCLE 774 DRIFTWOOD CIRCLE PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 02282005No Cha-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 57-1195513 Not Applicable \$5.00 Additional X 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COSGROVE, JAMES DO NOT WRITE 774 DRIFTWOOD CIRCLE PONTE VEDRA, FL 32082 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 (NOTE. Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME COSGROVE, JAMES 774 DRIFTWOOD CIRCLE STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 U00000252542 03/05/05-80032-012 55.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET AUDRESS 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.

James Cosgrove

3-1-2005

904-662-1113

Daytime Phone #

USALOW

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

SIGNATURE: