

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000053796

**FILED**  
**Feb 16, 2005**  
**Secretary of State**

**Entity Name:** IDLEWILD PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

3414 WEST CHEROKEE AVE  
TAMPA, FL 33611

**New Principal Place of Business:**

4003 OHIO AVE  
TAMPA, FL 33616

**Current Mailing Address:**

P.O. BOX 320781  
TAMPA, FL 33679

**New Mailing Address:**

FEI Number: 20-2305112      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

KAPINOS, PETER J  
3414 WEST CHEROKEE AVE  
TAMPA, FL 33611      US

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

KAPINOS, PETER J  
4003 OHIO AVE  
TAMPA, FL 33616      US

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: PETER KAPINOS

02/16/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM      ( ) Delete  
Name: KAPINOS, PETER J  
Address: 3414 WEST CHEROKEE AVE  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change ( ) Addition  
Name: KAPINOS, PETER J  
Address: 4003 OHIO AVE  
City-St-Zip: TAMPA, FL 33616

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: PETER KAPINOS

MGRM

02/16/2005

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