

**2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

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

DOCUMENT# L03000054132

Entity Name: TRUSTEE MANAGEMENT SERVICES, LLC

**Current Principal Place of Business:**

3959 VANDYKE ROAD  
SUITE 386  
LUTZ, FL 33558

**New Principal Place of Business:**

13806 SUMAC PL  
TAMPA, FL 33625

**Current Mailing Address:**

3959 VANDYKE ROAD  
SUITE 386  
LUTZ, FL 33558

**New Mailing Address:**

13806 SUMAC PL  
TAMPA, FL 33625

FEI Number: 20-0774830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CASE, JAMES B  
3959 VANDYKE ROAD  
SUITE 386  
LUTZ, FL 33558 US

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

CASE, JAMES B  
13806 SUMAC PL  
TAMPA, FL 33625 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:

11/22/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CASE, JAMES B  
Address: 3959 VANDYKE ROAD SUITE 386  
City-St-Zip: LUTZ, FL 33558

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CASE, JAMES B  
Address: 13806 SUMAC PL  
City-St-Zip: TAMPA, FL 33625

Title: MGR ( ) Change (X) Addition  
Name: CASE, RHONDA A  
Address: 13806 SUMAC PL  
City-St-Zip: TAMPA, FL 33625

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: JAMES B CASE

MGR

11/22/2005

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