2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 14, 2005 08:00 AM DOCUMENT # L03000054439 **Secretary of State** 1. Entity Name PERRY R CROSS L.L.C. Principal Place of Business Mailing Address 14291 113TH AV 14291 113TH AV LARGO, FL 33774 LARGO, FL 33774 02112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 84-1631429 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE HODGES, PAUL S 50 S BELCHER RD. IN THIS SPACE SUITE 115 CLEARWATER, FL 33765 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. 1 am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent algosture required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE CROSS, PERRY R NAME STREET ADDRESS 14291 118TH AVE. U00000228756 T2/14/05-80051-018 50.00 CITY-ST-ZIP LARGO, FL 33774 TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITE NAME STREET ADDRESS

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: TED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR AT

CITY-ST-ZIP

<u>2-10-05</u>

727 - 465 - 7607

Daytime Phone #