


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 26, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000057101 1. Entity Name DANNY G. RICHARDSON, L.L.C.	
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Principal Place of Business P.O. BOX 221 BARBERVILLE, FL 32105	Mailing Address P.O. BOX 221 BARBERVILLE, FL 32105
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DO NOT WRITE IN THIS SPACE



02232005No Chg-LLC CR2E083 (10/03)

4. FEI Number 41-3844975	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent RICHARDSON, JUDITH ANN 1000 SEMINOLE BEAR TRAIL PIERSON, FL 32180	DO NOT WRITE IN THIS SPACE
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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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RICHARDSON, DANNY G P.O. BOX 221 BARBERVILLE, FL 32105
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 606, Florida Statutes.

SIGNATURE: DANNY G RICHARDSON
Danny G Richardson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/21/2005 5865272314
Date Daytime Phone #