2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000005982

Entity Name: GRANT WRITERS, LLC

City-St-Zip:

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1916 HIGHVIEW DRIVE PALM HARBOR, FL 34683 US **Current Mailing Address: New Mailing Address:** 1916 HIGHVIEW DRIVE PALM HARBOR, FL 34683 US FFI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOTHROP, MONICA V ESQ 5300 BAYSHORE BOULEVARD TAMPA, FL 33611 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ALEONG, MICHELE S Name: Name: Address: 11354 STRATTON PARK DRIVE Address: City-St-Zip: TAMPA, FL 33617 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: RINEHART, A. LORI Name: RINEHART, A. LORI Address: 1916 HIGHVIEW DRIVE Address: 1916 HIGHVIEW DRIVE City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34683 US Title: MGRM () Delete Title: MGRM (X) Change () Addition LOTHROP, MONICA V ESQ. LOTHROP, MONICA V ESQ. Name: Name: 5300 BAYSHORE BOULEVARD, C-3 5300 BAYSHORE BOULEVARD, C-3 Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: TAMPA, FL 33611 US Title: () Delete Title: MGMR () Change (X) Addition Name: Name: ZAWLOCKI, RICHARD J PHD 3101 APRICOT STREET Address: Address:

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.

City-St-Zip:

SEFFNER, FL 33584 US

SIGNATURE: MONICA V. LOTHROP MGMR 05/02/2005