

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013299

FILED
Apr 11, 2005
Secretary of State

Entity Name: SUPPLY CHAIN CONCEPTS OF FLORIDA, LLC

Current Principal Place of Business:

4042 SUMMERWOOD AVENUE
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

4042 SUMMERWOOD AVENUE
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 20-0746808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

COFFMAN, WILLIAM G II
4042 SUMMERWOOD AVENUE
ORLANDO, FL 32812 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: WILLIAM G COFFMAN II

04/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: COFFMAN, WILLIAM G II
Address: 4042 SUMMERWOOD AVENUE
City-St-Zip: ORLANDO, FL 32812

Title: S () Delete
Name: COFFMAN, PAULA C
Address: 4042 SUMMERWOOD AVENUE
City-St-Zip: ORLANDO, FL 32812

Title: T (X) Delete
Name: COFFMAN, WILLIAM G II
Address: 4042 SUMMERWOOD AVENUE
City-St-Zip: ORLANDO, FL 32812

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COFFMAN, WILLIAM G II
Address: 4042 SUMMERWOOD AVENUE
City-St-Zip: ORLANDO, FL 32812

Title: MGRM (X) Change () Addition
Name: COFFMAN, PAULA C
Address: 4042 SUMMERWOOD AVENUE
City-St-Zip: ORLANDO, FL 32812

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM G COFFMAN II

MGRM

04/11/2005

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