## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000015698

Entity Name: MURABELLA, LLC

FILED Jan 11, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4729 U.S. HIGHWAY 17, SUITE 204 414 OLD HARD ROAD ORANGE PARK, FL 32073 SUITE 201 ORANGE PARK, FL 32003 **Current Mailing Address: New Mailing Address:** 4729 U.S. HIGHWAY 17, SUITE 204 414 OLD HARD ROAD ORANGE PARK, FL 32073 SUITE 201 ORANGE PARK, FL 32003 FEI Number: 20-0933935 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOOD, JAMES R WOOD, JAMES R 414 OLD HARD ROAD, SUITE 201 4729 U.S. HIGHWAY 17, SUITE 204 ORANGE PARK, FL 32073 US ORANGE PARK, FL 32003 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: 01/11/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: () Delete Title: ( ) Change (X) Addition WOOD DEVELOPMENT COM, PANY OF JACKSO N VILLE Name: Name: Address: Address: 414 OLD HARD ROAD, SUITE 201 City-St-Zip: City-St-Zip: ORANGE PARK, FL 32003 Title: Title: MGR ( ) Change (X) Addition ( ) Delete Name: Name: WOOD, JAMES RICKY PRES Address: Address: 414 OLD HARD ROAD, SUITE 201 City-St-Zip: City-St-Zip: ORANGE PARK, FL 32003 Title: () Delete Title: MGR ( ) Change (X) Addition WOOD, SUSAN D VP Name: Name: 414 OLD HARD ROAD, SUITE 201 Address: Address: City-St-Zip: City-St-Zip: ORANGE PARK, FL 32003 Title: () Delete Title: MGR ( ) Change (X) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: SUSAN D WOOD, VP OF CORP MGRM

Name:

Address:

City-St-Zip:

VΡ

EDWARDS, MABRY CFO

ORANGE PARK, FL 32003

414 OLD HARD ROAD, SUITE 201

01/11/2005