

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021762

Entity Name: ERA OF NORTH FLORIDA, LLC

FILED
Apr 11, 2005
Secretary of State

Current Principal Place of Business:

420 OAK HARBOR LANE, #205
DESTIN, FL 32541

New Principal Place of Business:

590 SANTA ROSA BLVD
FORT WALTON BEACH, FL 32548

Current Mailing Address:

420 OAK HARBOR LANE, #205
DESTIN, FL 32541

New Mailing Address:

590 SANTA ROSA BLVD
FORT WALTON BEACH, FL 32548

FEI Number: 20-0891324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITELL, LISA Y
4 ELEVENTH AVENUE, SUITE ONE
SHALIMAR, FL FL32579 US

Name and Address of New Registered Agent:

O'BANNON, SONYA K
590 SANTA ROSA BLVD
FORT WALTON BEACH, FL 32548 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: SONYA K O'BANNON

04/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ALEXANDER, S J
Address: 420 OAK HARBOR LANE, #205
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: ESTIVO, MICHAEL
Address: 12711 E. KILLARNEY STREET
City-St-Zip: WICHITA, KS 67206

ADDITIONS/CHANGES:

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

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: S. J. ALEXANDER

MGR

04/11/2005

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