

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024450

Entity Name: FIDS "LLC"

FILED
Feb 21, 2005
Secretary of State

Current Principal Place of Business:

900 VALASTICS AVE
314
VALPARAISO, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

315 BREEM AVE.
205
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

P.O.BOX 1602
FT. WALTON BEACH, FL 32549 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIDLER, SHAWN M
315 BREEM AVE.
205
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

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:

Title: MGRM (X) Delete
Name: ARNETT, DONNIE
Address: 114 ALDER AVE. SE. APT 2
City-St-Zip: FT. WALTON BEACH, FL 32548 US

Title: MGRM () Delete
Name: FIDLER, SHAWN M
Address: 315 BREEM AVE. STE 205
City-St-Zip: FT. WALTON BEACH, FL 32548 US

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: SHAWN FIDLER

MGMR

02/21/2005

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