

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024872

Entity Name: L. ROD SCREENING LC

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

2469 PINE CHASE CIRCLE
ST. CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

2469 PINE CHASE CIRCLE
ST. CLOUD, FL 34769

New Mailing Address:

FEI Number: 04-3788999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, LUIS M
2469 PINE CHASE CIRCLE
ST. CLOUD, FL 34769 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 () Delete
Name: RODRIGUEZ, LUIS M
Address: 2469 PINE CHASE CIRCLE
City-St-Zip: ST CLOUD, FL 34769

Title: MGRM () Delete
Name: RODRIGUEZ, NELLIE
Address: 2469 PINE CHASE CIRCLE
City-St-Zip: ST CLOUD, FL 34769

Title: MGR (X) Delete
Name: HOFFMAN, JESS M
Address: 1708 LAGUANA BAY APT 98
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: MEDINA, CARLOS
Address: 167 LONG RIDGE CT.
City-St-Zip: ORLANDO, FL 32807

Title: MGR () Delete
Name: CURRIE, ROBERT GARY
Address: 5790 E IRLON BRONSON MEM HWY
City-St-Zip: ST CLOUD, FL 34771

Title: MGR (X) Delete
Name: TERRELL, ROBERT
Address: 9957 3RD AVENUE
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES:

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

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

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

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

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: NELLIE RODRIGUEZ

MGRM

04/27/2005

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