2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT (AR)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED ANAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

DOCUMENT # L04000027067 1. Entity Name

CENTRAL ELORIDA IMPROVEMENTS LLO



FILED Aug 05, 2005 8:00 am Secretary of State 08-05-2005 90035 005 ****50.00

CENTRAL FLORIDA IMPROVEMENTS LLC													
Principal Place of Business			Mailing Address			•							
5052 BLACK BIRCH TRAIL MULBERRY FL 33860			5052 BLACK BIRCH TRAIL MULBERRY FL 33860										
Principal Place of Business			3. Mailing Address			"	RBIIDTO MY POÌTI OTA	II BBIII BBIU	83M 60M MAN	**************************************			
Suite, Apt. #, etc.			Suite, Apt. #, etc.					1st MOORE		CR2E08	3 (10/04)		
City & State				City & State				4. FEI Nun	nber	Λ1 <i>α</i> ′	7		pplied For
Žip	Country			Zip	ntry		5. Certificate of Status Desired S5.00 Additional Fee Required					ditional	
6. Name and Address of Current Reg				jistered Agent	1 .	T		7. Name a	nd Address o	of New R	egistered		au .
	·				_	Name		*					
HENDRICKS, SHAWN W 5052 BLACK BIRCH TRAIL				Street Address			ddress ((P.O. Box Number is Not Acceptable)					
MUI	LBERRY	FL 33860					_						
					City					FL	Zip Cod	le .	
8. The above the obligat	named entit tions of regis	y submits this staten tered agent	ent for the	e purpose of changing its	s register	red office or	register	ed agent, or i	ooth, in the St	ate of Flo	rida. Iam	familiar with,	, and accept
SIGNATURE	Signature, typed	or printed name of registere	d agent and to	rie 4 applicable (NO)	TE Register	ed Agent signatur	re required	when reinstating)			DATE		
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005													
9,	MANAGING MEMBERS/MANAGERS 10.								LADE	ITIONS/	CHANGES		
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CITY - ST - ZIP						-51-ZIP							
11. I hereby of indicated limited lia	certify that the on this report bility compar	e information supplie t is true and accurat ny or the regeiver or	d with this e and that Justee em	filing does not qualify fo my signature shall have powered to execute this	r the exe the same report as	mption state e legal effec s required by	ed in Sec t as if m y Chapt	otion 119.07(3 ade under oa er 608, Florida	(i), Florida S th; that I am a Statutes.	tatutes. I a manag	further cer ing membe	tify that the in or manage	nformation er of the