

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029928

FILED  
Jan 13, 2005  
Secretary of State

Entity Name: DWYER INVESTMENT GROUP LLC

**Current Principal Place of Business:**

1 CORPORATE DRIVE  
SUITE 2-D  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 350864  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 20-1286611

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DWYER, MARC E  
149 BARRINGTON DRIVE  
PALM COAST, FL 32137 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: MGR ( ) Delete  
Name: DWYER, MARC E  
Address: 149 BARRINGTON DRIVE  
City-St-Zip: PALM COAST, FL 32137

Title: MGRM ( ) Delete  
Name: DWYER, EVELYN  
Address: 60 EGRET TRAIL  
City-St-Zip: PALM COAST, FL 32164

Title: MGRM ( ) Delete  
Name: DWYER, DULCIA  
Address: 87-56 FRANCIS LEWIS BLVD. #B45  
City-St-Zip: QUEENS VILLIAGE, NY 11427

Title: MGRM ( ) Delete  
Name: DWYER, GLADSTONE  
Address: 60 EGRET TRAIL  
City-St-Zip: PALM COAST, FL 32164

Title: MGRM ( ) Delete  
Name: DWYER, ROSE  
Address: 149 BARRINGTON DRIVE  
City-St-Zip: PALM COAST, FL 32137

**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:

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: MARC E DWYER

MGR

01/13/2005

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