

FILED
May 31, 2005 8:00 am
Secretary of State

03-15-2005 90348 007 ****50.00

2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000031613			
1. Entity Name REFLECTIONS OFFICE ASSOCIATES, LLC			
Principal Place of Business 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32114		Mailing Address 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32114	
2. Principal Place of Business 444 SEABREEZE BLVD.		3. Mailing Address 444 SEABREEZE BLVD.	
Suite, Apt. #, etc. STE 1000		Suite, Apt. #, etc. STE 1000	
City & State DAYTONA BEACH, FL		City & State DAYTONA BEACH, FL	
Zip 32118	Country	Zip 32118	Country
4. FEI Number 20-1128414		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent TOWER, DEVIN 1030 W. INTERNATIONAL SPEEDWAY BLVD. DAYTONA BEACH, FL 32114		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 444 SEABREEZE BLVD. STE 1000 City DAYTONA BEACH, FL Zip Code 32118	
8. 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. I am familiar with, and accept the obligations of, registered agent.			
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.		DATE _____ NOTE: Registered Agent signature required when removing.	
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
10. MANAGING MEMBERS/MANAGERS/CHANGES TOWER, DEVIN ☐ Change ☒ Addition 444 SEABREEZE BLVD. STE. 1000 DAYTONA BEACH, FL 32118 MANAGING MEMBER LICHTIGMAN, CHARLES ☐ Change ☒ Addition 444 SEABREEZE BLVD. STE 1000 DAYTONA BEACH, FL 32118 MANAGING MEMBER MILLER, SANFORD ☐ Change ☒ Addition 444 SEABREEZE BLVD. STE. 1002 DAYTONA BEACH, FL 32118			
11. I hereby certify that the information supplied with this filing does not qualify 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 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 606, Florida Statutes.			
SIGNATURE  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		386.1383600 Date Daytime Phone #	