

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036158

Entity Name: THE WESLEY GROUP, LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

850 S. TAMiami TR
SUITE 109
SARASOTA, FL 34236 US

Current Mailing Address:

850 S. TAMiami TR
SUITE 109
SARASOTA, FL 34236 US

FEI Number: 20-1206665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

W.R. KLEIN P.A.
1900 MAIN ST.
SUITE 310
SARASOTA, FL FL US

New Principal Place of Business:

850 S. TAMiami TR
SUITE 335
SARASOTA, FL 34236 US

New Mailing Address:

850 S. TAMiami TR
SUITE 335
SARASOTA, FL 34236 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: FRANK, JOHN M
Address: 850 S. TAMiami TR SUITE 109
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM () Delete
Name: FRANK, KATHLEEN M
Address: 850 S. TAMiami TR SUITE 109
City-St-Zip: SARASOTA, FL 34236 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FRANK, JOHN M
Address: 850 S. TAMiami TR SUITE 335
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM (X) Change () Addition
Name: FRANK, KATHLEEN M
Address: 850 S. TAMiami TR SUITE 335
City-St-Zip: SARASOTA, FL 34236 US

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: JOHN M. FRANK

MGR

04/29/2005

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