2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037909

Entity Name: LICKITY SPLIT, LLC

FILED Jul 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

WINTHROP MARKET ST. 6260 WINTHROP TOWN CENTRE AVE

RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

Current Mailing Address: New Mailing Address:

WINTHROP MARKET ST. 6260 WINTHROP TOWN CENTRE AVE

RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

FEI Number: 20-1737528 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

RILEY, JAMES D 1512 KESTREL WAY BRANDON, FL 33511 US

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/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 RILEY, JAMES D
 Name:

 Address:
 1512 KESTREL WAY
 Address:

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 LUTZ, DON
 Name:
 LUTZ, DON

 Address:
 1607 HULETT DR
 Address:
 1609 HULETT DR

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 BRANDON, FL 33511

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: JAMES D. RILEY MGRM 07/06/2005