

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038989

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: HOUSE ATREIDES, L.L.C.

**Current Principal Place of Business:**

7855 ARGYLE FOREST BLVD., SUITE 302  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

7855 ARGYLE FOREST BLVD., SUITE 302  
JACKSONVILLE, FL 32244

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MOTOLAW, INC.  
50 NORTH LAURA STREET, SUITE 2500  
JACKSONVILLE, FL 32202 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: BERGER, MARC S M.D.  
Address: 7855 ARGYLE FOREST BLVD., SUITE 302  
City-St-Zip: JACKSONVILLE, FL 32244

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 S. BERGER, M.D.

MGR

04/30/2005

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