## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Mar 18, 2005 8:00 am Secretary of State

DOCUMENT # L04000049775  1. Entity Name IDEAL VENTURES V, LLC					03-18-2005 90384 005 ****50.00					
Principal Place of Business Mailing Address 3325 WEST WALLCRAFT AVENUE P.O. BOX 1466 TAMPA, FL 33611 TAMPA, FL 33601					1 (8.9 metr <b>8</b> 11 (	<b>a b</b> iel <b>e</b> 'i <b>e</b> 'i <b>e e a</b> il i <b>a s</b> illi <b>a</b>	1871 SEMI BLBTS 1841 :	asi: (Pad) +		
2. Principal Place of Business 220 East Madison St.		3. Mailing Address								
Suite Agr. # etc 1110		Suite, Apt. #, etc.			02232005	Chg-LLC	CR2E083	(10/03)		
City & State Tampa, FL		City & State			4. FEI Numbe 20-13	50930		<del></del>	oplied For ot Applicable	
Zip 33602		Zip	Country		5. Certificate of	of Status Desired		5.00 Add e Require		
	6. Name and Address of Current F	legistered Agent			7. Name and	Address of New	Registered Age	ent		
Na										
WATERS, CODY W : 501 EAST KENNEDY BLVD., SUITE 1700 TAMPA, FL 33602				Street Address (P.O. Box Number is Not Acceptable)						
·			City	City FL Zip Code						
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 Russell Blumenthal Millian 3/5/05										
	Signature, typed or printed name of registered agent at	nd little if applicable. (NOTE: F	Tegistered Agent signat	are required	when reinstating)	12m 4 a 2 m 2 m	DATE	<del></del>	<del></del>	
Filing Fee is \$50.00 Due by May 1, 2005						Flori	ike check pay da Departmen			
9.	MANAGING MEMBER	RS/MANAGERS	10.			ADDITION:	S/CHANGES		<del></del> -	
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11. Thereby certify that the information supplied with this fling does not qualify for the exemption is accounted in section 119.0/(3/f), round statutes. Thereby certifying indicated on this report is true and accurate and that my signature shall have the same legal effect as section 119.0/(3/f), 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.

Russell Blumenthal

MANAGER OR AUTHORISED REPORTATIVE

813-224-0742

Date

Daytime Phone #