


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 21, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000052536</b> 1. Entity Name <b>SPK, LLC</b>	
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Principal Place of Business <b>5030 SUNRISE DRIVE ST. PETERSBURG, FL 33705</b>	Mailing Address <b>5030 SUNRISE DRIVE ST. PETERSBURG, FL 33705</b>
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**DO NOT WRITE IN THIS SPACE**



02152007No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>20-1391468</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**FARLEY, PHILIP J III  
5030 SUNRISE DRIVE  
ST. PETERSBURG, FL 33705**

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

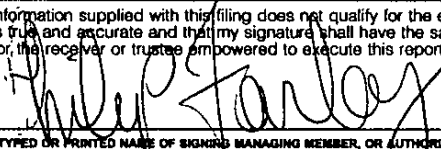
**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM FARLEY, PHILIP 5030 SUNRISE DRIVE ST. PETERSBURG, FL 33705</b>
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03/29/07-80090-015 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 608, Florida Statutes.

**SIGNATURE:**  **3/1/07** **727-347-5796**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #