



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90019 049 ****50.00

DOCUMENT # L04000056119					
1. Entity Name TIKI TREEHOUSE, LLC					
Principal Place of Business 4053 B DORCH CIRCLE VERNON, FL 32462 US			Mailing Address 4053 B DORCH CIRCLE VERNON, FL 32462 US		
2. Principal Place of Business Suite, Apt. #, etc. <u>SAME</u>		3. Mailing Address Suite, Apt. #, etc. <u>SAME</u>			
City & State		City & State		04152005 Chg-LLC CR2E083 (10/03)	
Zip		Country		4. FEI Number 20-1425251	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent YOUNG, SANDRA L 4053 B DORCH CIRCLE VERNON, FL 32462			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 <u>[Signature]</u>			DATE <u>4-15-2005</u>		
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR YOUNG, SANDRA L 4053 B DORCH CIRCLE VERNON, FL 32462	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <u>[Signature]</u>		
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date <u>4-15-2005</u>		
			Daytime Phone # <u>8505351308</u>		