

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056308

Entity Name: GLYPHIX ART GROUP, LLC

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

11530 GROVE STREET.
SEMINOLE, FL 33772

New Principal Place of Business:

24242 PAINTER DRIVE
LAND O LAKES, FL 34639

Current Mailing Address:

11530 GROVE STREET.
SEMINOLE, FL 33772

New Mailing Address:

24242 PAINTER DRIVE
LAND O LAKES, FL 34639

FEI Number: 43-2058791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CROSS, AMY L
11530 GROVE STREET
SEMINOLE, FL 33705 US

Name and Address of New Registered Agent:

CROSS, AMY L
24242 PAINTER DRIVE
LAND O LAKES, FL 34639 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: AMY L. CROSS

04/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: CROSS, AMY L
Address: 11530 GROVE STREET
City-St-Zip: SEMINOLE, FL 33772

Title: MGRM () Delete
Name: CROSS, JEFFREY D
Address: 11530 GROVE STREET
City-St-Zip: SEMINOLE, FL 33772

Title: MGRM () Delete
Name: NEHR, BARRION D
Address: 11530 GROVE STREET
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CROSS, AMY L
Address: 24242 PAINTER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM (X) Change () Addition
Name: CROSS, JEFFREY D
Address: 24242 PAINTER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

Title: MGRM (X) Change () Addition
Name: NEHR, BARRION D
Address: 24242 PAINTER DRIVE
City-St-Zip: LAND O LAKES, FL 34639

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: AMY L. CROSS

MGR

04/28/2005

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