

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000057610

Entity Name: NO ROAD, LLC

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

5500 PHILLIPS HWY
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

5500 PHILLIPS HWY
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 04-3796175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

SAYAR, GEORGE Y
5500-00 PHILIPS HIGHWAY
JACKSONVILLE, FL 32207 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: GEORGE SAYAR

01/06/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: DAVID, CHARLES
Address: 5500 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: MGR () Delete
Name: SAYAR, GEORGE Y
Address: 5500 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

Title: ST (X) Delete
Name: SAYAR, GEORGE Y
Address: 5500 PHILLIPS HWY
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GEORGE SAYAR

MGR

01/06/2005

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