

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058961

Entity Name: CCI, LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

6615 SW 13TH STREET
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

6615 SW 13TH STREET
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERKINS, JOHN K JR
6615 SW 13TH STREET
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HUTCHINS, WILLIAM C
Address: 12003 SE 31ST PLACE
City-St-Zip: GAINESVILLE, FL 32641

Title: MGRM () Delete
Name: ECCLES, SCOTT
Address: 2936 NW 35TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HUTCHINS, WILLIAM C
Address: 12003 SE 31ST PLACE
City-St-Zip: GAINESVILLE, FL 32641

Title: MGR (X) Change () Addition
Name: ECCLES, SCOTT
Address: 2936 NW 35TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGR () Change (X) Addition
Name: PERKINS, JOHN K
Address: 6615 SW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608 US

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: JOHN K. PERKINS JR.

MGR

04/29/2005

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