2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 04, 2005
Secretary of State

DOCUMENT# L04000059122

Entity Name: CO OWNERS LLC

Current Principal Place of Business:

2203 NORTH LOIS AVENUE, STE 950
TAMPA, FL 33607

New Principal Place of Business:

2207 54TH ST S
GULFPORT, FL 33707

Current Mailing Address:

2203 NORTH LOIS AVENUE, STE 950
TAMPA, FL 33607

New Mailing Address:

2207 54TH ST S
GULFPORT, FL 33707

FEI Number: 20-1167647 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

VOLLMER, LISA
2203 NORTH LOIS AVENUE, STE 950
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

HASTINGS, DAVID C CPA
2207 54TH ST S
GULFPORT, FL 33707 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: DAVID C HASTINGS 05/04/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: VOLLMER, LISA
Address: 2203 NORTH LOIS AVENUE, STE 950
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES:

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: DAVID C HASTINGS RA 05/04/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date