

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060807

Entity Name: FLORID GROUP, L.L.C.

FILED
Mar 19, 2005
Secretary of State

Current Principal Place of Business:

550 HEATHER OAK COVE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

550 HEATHER OAK COVE
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-1510913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATTA, PHANEENDRA
550 HEATHER OAK COVE
ALTAMONTE SPRINGS, FL 32714 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: KATT, PHANEENDRA
Address: 550 HEATHER OAK COVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: THULLURU, SAI LAKSHMI
Address: 1920 BOBTAIL ROAD
City-St-Zip: MAITLAND, FL 32751

Title: MGRM () Delete
Name: LADKAT, VIJAYA V
Address: 25436 CARRINGTON DRIVE
City-St-Zip: SOUTH RIDING, VA 20152

Title: MGRM () Delete
Name: KALAHASTI, RAJYALAKSHMI
Address: 3609 HIDDEN FOREST DRIVE
City-St-Zip: FLOWER MOUND, TX 75028

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KATTA, PHANEENDRA
Address: 550 HEATHER OAK COVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: PHANEENDRA KATTA

MGRM

03/19/2005

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