

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065305

Entity Name: STEWART HOLDINGS, LLC

FILED
Feb 10, 2005
Secretary of State

Current Principal Place of Business:

PO BOX 471476
LAKE MONROE, FL 32747

New Principal Place of Business:

Current Mailing Address:

PO BOX 471476
LAKE MONROE, FL 32747

New Mailing Address:

FEI Number: 05-0608315

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:

ALIRAZA, MANEKIA A MGR
4989 SHORELINE CIR
SANFORD, FL 32771 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: ALIRAZA MANEKIA

02/10/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MANEKIA, ALIRAZA A
Address: 1180 SPRING CENTER SOUTH BLVD STE 110
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

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

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MANEKIA, ALIRAZA A
Address: 4989 SHORELINE CIR
City-St-Zip: SANFORD, FL 32771

Title: MGR () Change (X) Addition
Name: SIBTAIN, MANEKIA A
Address: 628 SAMANTHA LANE
City-St-Zip: LAKE MARY, FL 32746

Title: MGR () Change (X) Addition
Name: SHABBIR, MANEKIA A
Address: 112 CALABRIA SPRINGS COVE
City-St-Zip: SANFORD, FL 32771

Title: MGR () Change (X) Addition
Name: KAZIM, KERMALI F
Address: 125 CALABRIA SPRINGS COVE
City-St-Zip: SANFORD, FL 32771

Title: MGR () Change (X) Addition
Name: SHABBAR, KERMALI F
Address: 515 RANDON TERRACE
City-St-Zip: LAKE MARY, FL 32746

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: ALIRAZA MANEKIA

MGR

02/10/2005

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