

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065754

FILED  
Jul 13, 2005  
Secretary of State

**Entity Name:** THE CREATIVE AWARENESS CENTER, LLC

**Current Principal Place of Business:**

28331 S. TAMiami TR.  
STE 1  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

28331 S. TAMiami TR.  
BUILDING 3, SUITE 1  
BONITA SPRINGS, FL 34134

**Current Mailing Address:**

159 WILLOWICK DRIVE  
NAPLES, FL 34110

**New Mailing Address:**

FEI Number: 20-1664848      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:**

**Name and Address of New Registered Agent:**

WAGONER, VICKI  
159 WILLOWICK DR.  
NAPLES, FL 34110      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WAGONER, VICKI  
Address: 159 WILLOWICK DRIVE  
City-St-Zip: NAPLES, FL 34110

Title: MGRM      ( ) Delete  
Name: SKLODOWSKI, BILL  
Address: 2424 EPHRIAM AVE.  
City-St-Zip: FT. MYERS, FL 33907

**ADDITIONS/CHANGES:**

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: BILL SKLODOWSKI

MR

07/13/2005

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