

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065937

Entity Name: LOQUAT, LLC

FILED
May 19, 2005
Secretary of State

Current Principal Place of Business:

9105 LAKE LYNN DR
SEBRING, FL 33876

New Principal Place of Business:

Current Mailing Address:

9105 LAKE LYNN DR
SEBRING, FL 33876

New Mailing Address:

FEI Number: 80-0119233 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:

FILA, JOSEPH
9105 LAKE LYNN DR
SEBRING, FL 33876 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: FILA, JOSEPH
Address: 9105 LAKE LYNN DR
City-St-Zip: SEBRING, FL 33876

Title: MGRM () Delete
Name: KOLEGUE, RICHARD
Address: 131 LAKE APTHORPE DR
City-St-Zip: LAKE PLACID, FL 33852

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: JOSEPH FILA

MGRM

05/19/2005

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