

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068939

FILED  
Feb 24, 2005  
Secretary of State

Entity Name: TECHTAMERS, LLC

**Current Principal Place of Business:**

8243 SE CUMBERLAND CIRCLE  
HOBE SOUND, FL 33455 US

**New Principal Place of Business:**

**Current Mailing Address:**

8243 SE CUMBERLAND CIRCLE  
HOBE SOUND, FL 33455 US

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

CRAIG, JEANNIE E  
8243 SE CUMBERLAND CIRCLE  
HOBE SOUND, FL 33455 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: CRAIG, LANCE L  
Address: 8243 SE CUMBERLAND CIRCLE  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete  
Name: NELSON, GREGORY E  
Address: 7383 SE JAMES STREET  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete  
Name: CRAIG, JEANNIE E  
Address: 8243 SE CUMBERLAND CIRCLE  
City-St-Zip: HOBE SOUND, FL 33455 US

Title: MGRM ( ) Delete  
Name: NELSON, TONI E  
Address: 7383 SE JAMES STREET  
City-St-Zip: HOBE SOUND, FL 33455 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEANNIE E. CRAIG

MGRM

02/24/2005

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