2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 10, 2005 8:00 am
Secretary of State
03-10-2005 90036 049 ****55.00

DOCUMENT # L04000069628

1. Entity Name

BIDDISCOMBE HOLDINGS, LLC

20019702

1st MOORE CR2E083 (10/04)

Principal Place of Business	Mailing Address
101 EAST KENNEDY BOULEVARD SUITE 3925 TAMPA FL 33602 US	101 EAST KENNEDY BOULEVARD SUITE 3925 TAMPA FL 33602 US
2. Principal Place of Business: 14450 46th St. North	3. Mailing Address: 14450 46th st. North
Suite, Apt. #, etc.: 116	Suite, Apt. #, etc.: 116
City & State: Clearwater	City & State: Clearwater
Zip: 33762 Country: ~~US~~ Pinellas	Zip: 33762 Country: Pinellas

4. FEI Number: 35-2238606 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

ROCKE, MCLEAN & SBAR, P.A.
100 NORTH TAMPA STREET
SUITE 3575
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM LECK, P J 101 EAST KENNEDY BOULEVARD, SUITE 3925 TAMPA FL 33602	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KIRTLEY, JOHN F 101 EAST KENNEDY BOULEVARD, SUITE 3925 TAMPA FL 33611	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~MGRM~~ ~~Peter~~ Melville, John H. 14450 46th St. N, Ste 116 Clearwater FL 33762	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Melville, John H. 14450 46th St. N, Ste. 116 Clearwater FL 33762 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~MGRM~~ ~~Lewis, Peter F.~~ ~~14450 46th St N~~ ~~Clearwater FL 33762~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Lewis, Peter F 14450 46th St. N., Ste 116 Clearwater FL 33762 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: John H. Melville, John H. Melville, Managing Member 1/26/05 727 289-9077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #