

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071644

FILED
Apr 10, 2005
Secretary of State

Entity Name: SANDOLLAR VENTURES INTERNATIONAL, LLC

Current Principal Place of Business:

20470 FOXWORTH CR
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

20470 FOXWORTH CR
ESTERO, FL 33928

New Mailing Address:

FEI Number: 20-1626140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ROBERT L
20470 FOXWORTH CR
ESTERO, FL 33928 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: MILLER, ROBERT L
Address: 20470 FOXWORTH CR
City-St-Zip: ESTERO, FL 33928

Title: MGRM () Delete
Name: MILLER, CAROL L
Address: 20470 FOXWORTH CR
City-St-Zip: ESTERO, FL 33928

Title: MGRM (X) Delete
Name: MILLER, JEFFERY W
Address: 15218 HORSESHOE BAY CIRCLE
City-St-Zip: FT MYERS, FL 33912

Title: MGRM (X) Delete
Name: MILLER, LAURA L
Address: 15218 HORSESHOE BAY CIRCLE
City-St-Zip: FT MYERS, FL 33912

Title: MGRM () Delete
Name: NOONAN, PATRICK C
Address: 9108 IRVING AVE.
City-St-Zip: FT MYERS, FL 33912

Title: MGRM () Delete
Name: NOONAN, ERICA L
Address: 9108 IRVING AVE.
City-St-Zip: FT MYERS, FL 33912

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:

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: ROBERT L. MILLER

MGR

04/10/2005

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