

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000072647

FILED  
Jul 07, 2005  
Secretary of State

Entity Name: OVER C, LLC

**Current Principal Place of Business:**

357 CARDIFF AVE.  
DAVENPORT, FL 33897

**New Principal Place of Business:**

**Current Mailing Address:**

357 CARDIFF AVE.  
DAVENPORT, FL 33897

**New Mailing Address:**

FEI Number: 20-1735327      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:**

BANNER, MICHAEL  
4244 W. TENNESSEE ST.  
#185  
TALLAHASSEE, FL 32304 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: MGRM ( ) Delete  
Name: CREELMAN, JAMES L  
Address: 10 KNOCKLAYDE PARK  
City-St-Zip: COLERAINE COUNTY DERRY, IE BT51 3HW IE

Title: MGRM ( ) Delete  
Name: MERGENTHALER, JAMES  
Address: 357 CARDIFF AVE.  
City-St-Zip: DAVENPORT, FL 33897

Title: MGRM ( ) Delete  
Name: MATEJICKA, NICOLE  
Address: 357 CARDIFF AVE.  
City-St-Zip: DAVENPORT, FL 33897

**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:

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: JAMES MERGENTHALER

MGRM

07/07/2005

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