2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000074000

Entity Name: SPECAT, L.L.C.

City-St-Zip:

FILED Jan 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3912 INDIAN TRAIL 815 TURNBERRY WAY DESTIN, FL 32541 NICEVILLE, FL 32578 **Current Mailing Address: New Mailing Address:** 815 TURNBERRY WAY 3912 INDIAN TRAIL DESTIN, FL 32541 NICEVILLE, FL 32578 FEI Number: 20-1744524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GALLANT, ROBIN CONCEPCION, CHERYL 815 TURNBERRY WAY 3912 INDIÁN TRAIL DESTIN, FL 32541 NICEVILLE, FL 32578 US 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: CHERYL CONCEPCION 01/30/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GALLANT, ROBIN Name: Name: Address: 3912 INDIAN TRAIL Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: Title: () Delete Title: MGRM () Change (X) Addition Name: Name: NELSON, MICHAEL G Address: Address: 9 ARDMORE CT City-St-Zip: City-St-Zip: NICEVILLE, FL 32578 Title: () Delete Title: MGR () Change (X) Addition CONCEPCION, CHERYL Name: Name: 815 TURNBERRY WAY Address: Address:

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.

City-St-Zip:

NICEVILLE, FL 32578

SIGNATURE: ROBIN GALLANT MGRM 01/30/2005