


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-04-2005 90430 041 ****55.00

DOCUMENT # L04000076150 1. Entity Name CSI, LLC					
Principal Place of Business 9949 PUOPOLO LANE BONITA SPRINGS, FL 34135			Mailing Address P. O. BOX 188 BONITA SPRINGS, FL 34133		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-2280778	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SIMS, STEVEN R 9949 PUOPOLO LANE BONITA SPRINGS, FL 34135				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small>					
Filing Fee is \$50.00 Due by May 1, 2005		Make check payable to Florida Department of State		DATE _____	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SIMS, STEVEN R P. O. BOX 188 BONITA SPRINGS, FL 34133	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GUDDAL, CHRISTINE K 435 OAK AVE. NAPLES, FL 34108	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>Steven R Sims</i>				Date: <i>3/24/05</i> Daytime Phone #: <i>239-572-2339</i>	

30004263



01252005 Chg-LLC CR2E083 (10/03)



R01686

Department of the Treasury
Internal Revenue Service
MEMPHIS TN 37501-0038

SBV

Date of this notice: MAR. 28, 2005
Number of this notice: 277
Taxpayer Identification Number: 20-2280778
Form: Tax Period:

ATTACHMENT

30004263
204000076150

For assistance you may call us at:

1-800-829-0115

CSI LLC
SIMS STEVEN R MBR
PO BOX 188
BONITA SPGS FL 34133-018883

WE HAVE APPROVED YOUR FORM 8832, ENTITY CLASSIFICATION ELECTION

WE HAVE APPROVED YOUR ELECTION AS A DOMESTIC ELIGIBLE ENTITY TO BE CLASSIFIED AS AN ASSOCIATION TAXABLE AS A CORPORATION. THE EFFECTIVE DATE OF THIS ELECTION IS DEC. 10, 2004.

If you have any questions about this notice, please call us at the number shown above. If you prefer you can write us. If you write, please include the bottom part of this notice. Please provide your telephone number and the best time for us to call if we need to reach you.

Helpful Hint: For faster service, try calling us any day except Monday when our call volumes are highest.

Thank you for your cooperation.

Keep this part for your records

Return this part to us with inquiry

Your telephone number

() —

Best time to call

SB

CP-277

Taxpayer Identification Number: 20-2280778

Internal Revenue Service
MEMPHIS TN 37501-0038



CSI LLC
SIMS STEVEN R MBR
PO BOX 188
BONITA SPGS FL 34133-018883