

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000077885

FILED
Apr 10, 2005
Secretary of State

Entity Name: RAVEN'S EYE PROTECTIVE SERVICES, LLC

Current Principal Place of Business:

216 WEST WARREN AVENUE
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

PO BOX 521532
LONGWOOD, FL 32752

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARON, EDWIN JAMES
216 WEST WARREN AVENUE
LONGWOOD, FL 32750 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: BARON, EDWIN JAMES
Address: 216 WEST WARREN AVENUE
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BARON, EDWIN J
Address: 216 WEST WARREN AVENUE
City-St-Zip: LONGWOOD, FL 32750

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: EDWIN J BARON

MGRM

04/10/2005

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