2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2005
Secretary of State

DOCUMENT# L04000078231

Entity Name: NINE TO FIVE OFFICE FURNITURE LLC

Current Principal Place of Business:

5380 NW 55TH BLVD
#107
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

5380 NW 55TH BLVD
#107
COCONUT CREEK, FL 33073

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:

ANTH, BRIAN M
5380 NW 55TH BLVD
#107
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

ANTH, VIRGINIA L
5380 NW 55TH BLVD
#107
COCONUT CREEK, FL 33073 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: VIRGINIA L ANTH 02/05/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: ANTH, BRIAN M
Address: 5380 NW 55TH BLVD #107
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGRM ( ) Delete
Name: ANTH, VIRGINIA L
Address: 5380 NW 55TH BLVD #107
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES:

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: VIRGINIA L ANTH MGRM 02/05/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date