

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079906

FILED  
May 19, 2005  
Secretary of State

Entity Name: VERONICA BUSINESS PARK, LLC

**Current Principal Place of Business:**

8771 COLLEGE PARKWAY  
SUITE 101  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

14706 OSPREY POINT DRIVE  
FORT MYERS, FL 33908 US

**New Mailing Address:**

FEI Number: 20-2693549      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

CONSOER, GEORGE L  
1625 HENDRY STREET  
3RD FLOOR  
FORT MYERS, FL, FL 33902 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: JOHNSTON, ROBERT L  
Address: 14706 OSPREY POINT DRIVE  
City-St-Zip: FORT MYERS, FL 33908 US

Title: MGRM ( ) Delete  
Name: JEWITT, JEFFREY J  
Address: 623 BAYSIDE DRIVE  
City-St-Zip: FORT MYERS, FL 33919 US

**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: ROBERT L JOHNSTON

MGRM

05/19/2005

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