

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081259

FILED
May 02, 2005
Secretary of State

Entity Name: TREASURE ISLAND 7 L.L.C.

Current Principal Place of Business:

11555 GULF BLVD
#113
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

16921 MELISSA ANN DR
LUTZ, FL 33558

New Mailing Address:

FEI Number: 38-3711413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

HARTSFIELD, TAMELA
16921 MELISSA ANN DR
LUTZ, FL 33558 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: COPENHAVER, ELIZABETH
Address: 18936 ST.LAURENT DRIVE
City-St-Zip: LUTZ, FL 33558

Title: MGRM () Delete
Name: GIDEON, JILL
Address: 4630 WESTFORD CIRCLE
City-St-Zip: TAMPA, FL 33618

Title: MGRM () Delete
Name: COPENHAVER, CHRISTOPHER
Address: 15123 DEER MEADOW
City-St-Zip: LUTZ, FL 33559

Title: MGRM () Delete
Name: HARTSFIELD, TAMELA
Address: 16921 MELISSA ANN DRIVE
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TAMELA HARTSFIELD

MGMR

05/02/2005

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