

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083331

FILED  
Jul 25, 2005  
Secretary of State

Entity Name: NORTON CARRIER L.L.C.

**Current Principal Place of Business:**

401 NORTH WALL STREET, LOT 67  
BUSHNELL, FL 33513

**New Principal Place of Business:**

401 NORTH WALL STREET, LOT 67  
BUSHNELL, FL 33513 US

**Current Mailing Address:**

401 NORTH WALL STREET, LOT 67  
BUSHNELL, FL 33513

**New Mailing Address:**

401 NORTH WALL STREET, LOT 67  
BUSHNELL, FL 33513 US

FEI Number: 33-1113226      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:**

**Name and Address of New Registered Agent:**

STINE, DENISE R  
401 NORTH WALL STREET, LOT 67  
BUSHNELL, FL 33513 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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: STINE, DENISE R  
Address: 401 NORTH WALL STREET, LOT 67  
City-St-Zip: BUSHNELL, FL 33513

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: STINE, DENISE R  
Address: 401 NORTH WALL STREET, LOT 67  
City-St-Zip: BUSHNELL, FL 33513 US

Title: MGRM ( ) Change (X) Addition  
Name: BRESSLER, KEVIN L  
Address: 401 NORTH WALL STREET, LOT 67  
City-St-Zip: BUSHNELL, FL 33513 US

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: DENISE R STINE

MGRM

07/25/2005

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