2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 01, 2005
Secretary of State

DOCUMENT# L04000087957

Entity Name: SHEASAM, LLC

Current Principal Place of Business:

114 SOUTH PARK AVENUE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

114 SOUTH PARK AVENUE
SANFORD, FL 32771 US

New Mailing Address:

PO BOX 300070
FERN PARK, FL 32730 US

FEI Number: 84-1663351 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHAMPION, DONNA
114 SOUTH PARK AVENUE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

CHAMPION, DONNA
PO BOX 300070
FERN PARK, FL 32730 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: DONNA CHAMPION 03/01/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: HOLCOMB, SANDRA
Address: 114 SOUTH PARK AVENUE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM ( ) Delete
Name: CHAMPION, DONNA
Address: 114 SOUTH PARK AVENUE
City-St-Zip: SANFORD, FL 32771 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HOLCOMB, SANDRA
Address: PO BOX 300070
City-St-Zip: FERN PARK, FL 32730 US

Title: MGRM (X) Change ( ) Addition
Name: CHAMPION, DONNA
Address: PO BOX 300070
City-St-Zip: FERN PARK, FL 32730 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: SANDRA HOLCOMB MGRM 03/01/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date