

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088008

Entity Name: MAXMAN CENTURY, LLC

FILED  
Mar 17, 2005  
Secretary of State

**Current Principal Place of Business:**

3230 ST. CHARLES PLACE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

3230 ST. CHARLES PLACE  
BOCA RATON, FL 33434

**New Mailing Address:**

FEI Number: 20-1965244      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RICHTER, DONNA  
3230 ST. CHARLES PLACE  
BOCA RATON, FL 33434 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: RICHTER, DONNA  
Address: 3230 ST. CHARLES PLACE  
City-St-Zip: BOCA RATON, FL 33434

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: RICHTER, HAROLD  
Address: 3230 ST. CHARLES PLACE  
City-St-Zip: BOCA RATON, FL 33434

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 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: HAROLD RICHTER

DR.

03/17/2005

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