

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000088009

Entity Name: AVSNF LLC

**FILED**  
**Jun 28, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

490 SOUTH OLD WIRE ROAD  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

490 SOUTH OLD WIRE ROAD  
WILDWOOD, FL 34785

**New Mailing Address:**

7491 W. OAKLAND PARK BLVD. #100  
LAUDERHILL, FL 33319

FEI Number: 20-2993391      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:**

UCC FILING & SEARCH SERVICES, INC.  
526 EAST PARK AVENUE  
TALLAHASSEE, FL 32301      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: ROOZ, EFRAIM  
Address: 490 SOUTH OLD WIRE ROAD  
City-St-Zip: WILDWOOD, FL 34785

**ADDITIONS/CHANGES:**

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: EFRAIM ROOZ

MGRM

06/28/2005

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