

• 2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

8/30/2005-90015-007-\$50.00-\$50.00

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

30011188



07182005 Chg-LLC CR2E083 (10/03)

1. Entity Name LIGHT BULB DEPOT 29 LLC			
Principal Place of Business 6440-C E. COLONIAL ORLANDO, FL 32807 US		Mailing Address 6440-C E. COLONIAL ORLANDO, FL 32807 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent  FORM-A-CORP LLC 100 VILLAGE SQUARE CROSSING SUITE 103 PALM BEACH GARDENS, FL 33410		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> (NOTE: Registered Agent signature required when renaming) <span style="float: right;">DATE _____</span>			
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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11. 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 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: *Rickey, Secretary*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

8-11-05 941-552-2443  
Date Daytime Phone #