

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

4/4

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-04-2005 90427 047 ****50.00

DOCUMENT # L04000092188

1. Entity Name
EKHO, LLC



Principal Place of Business
2772-S N.W. 43RD STREET
GAINESVILLE, FL 32606

Mailing Address
2772-S N.W. 43RD STREET
GAINESVILLE, FL 32606

30004300



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02252005 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
01-0825459

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLDEN, CHARELS I JR.
2772-S N.W. 43RD STREET
GAINESVILLE, FL 32606

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2005

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
EUBANK, FREDERICK W II
2145 MALVERN ROAD
CHARLOTTE, NC 28207 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
KOSS, WILLIAM F TRUSTEE
2700-A N.W. 43RD STREET
GAINESVILLE, FL 32606 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
HOLDEN, CHARLES I JR.
2772-S N.W. 43RD STREET
GAINESVILLE, FL 32606 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
OLINGER, WILLIAM D
2700-A N.W. 43RD STREET
GAINESVILLE, FL 32606 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
OLINGER, WILLIAM D III
2700-A N.W. 43RD STREET
GAINESVILLE, FL 32606 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 606, Florida Statutes.

SIGNATURE:

Charles I Holden

2-25-05

352-377-5900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #