


Jan 16,
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**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000104458		
1. Entity Name EXPEDITED RESALES, LLC		
Principal Place of Business 1884 STICKNEY POINT ROAD SARASOTA, FL 34231		Mailing Address 1884 STICKNEY POINT ROAD SARASOTA, FL 34231
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BUSINESS FILINGS INCORPORATED 1203 GOVERNOR'S SQUARE BLVD SUITE 101 TALLAHASSEE, FL 32301-2960		01102007 No Chg-LLC CR2E083 (11/05)
		4. FEI Number 20-3695497
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.		Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MALTBY, ERIK 1884 STICKNEY POINT ROAD SARASOTA, FL 34231	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MBR MCNALLY, WILLIAM J 1884 STICKNEY POINT ROAD SARASOTA, FL 34231	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 609, Florida Statutes.		
SIGNATURE: <u><i>[Signature]</i></u> 1/9/07 (941) 650-4459 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>		