

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L93000000102

Entity Name: SAFESYTE, L.C.

FILED  
Mar 01, 2005  
Secretary of State

**Current Principal Place of Business:**

5100-318 S. CLEVELAND AVE.  
#345  
FT. MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

1296 WINDBREAK CT NE  
ROCHESTER, MN 55906

**New Mailing Address:**

107 RIVER BLUFF PL NW  
ROCHESTER, MN 55901

FEI Number: 65-0444959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCKINNEY, LANCE  
12155 METRO PKWY  
SUITE 28A  
FT. MYERS, FL 33912 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: WATTS, ALLAN P  
Address: 1741 REDCEDAR DR. #7  
City-St-Zip: FT. MYERS, FL 33906

Title: MGRM ( ) Delete  
Name: WATTS, JULIE L  
Address: 1741 REDCEDAR DR. #7  
City-St-Zip: FT. MYERS, FL 33906

**ADDITIONS/CHANGES:**

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 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: JULIE L. WATTS

MGRM

03/01/2005

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