## 2005 LIMITED LIABILITY COMPANY • ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L96000001119**

1. Entity Name

FARRELL & HARPER LC



Principal Place of Business Ma

316 21ST AVENUE NE St. Petersburg, Fl Mailing Address
316 21ST AVENUE NE
ST. PETERSBURG, FL

## FILED Apr 20, 2005 8:00 am Secretary of State

04-20-2005 90042 027 \*\*\*\*50.00



03262005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3416511 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARPER, LINDA S 316 21ST AVENUE NE ST. PETERSBURG, FL

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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. Familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature types or principlems of ingrithed agent and the # exprication.    Priting Fee is \$ \$50.00					
Filting Fee is \$50.00 Due by May 1, 2005  8. MARRAGING MEMBERS/MANAGERS  III.F MGRM FARRELL, KATHLEEN L STRETIADRESS 316 21ST AVE. NE STRETIADRESS 316 21ST AVENUE NE STRETIADRESS 316 21ST AVENUE NE STRETIADRESS 316 21ST AVENUE NE STRETIADRESS CITY-ST-7P III.F III.	8. The above the obligati	named entity submits this statement for the purpose of char ons of registered agent.	nging its registered office of	or registered agent, or both, in the Stat	te of Rorida. I am familiar with, and acce
Filling Fee is \$50.00 Due by May 1, 2005  9. MARAGING MEMBERS/MANAGERS  ITIL MARE FARRELL, KATHLEEN L 316 21ST AVE. NE STREPT ADDRESS CITY-ST-7P TITLE MARE STREPT ADDRESS CITY-ST-7P TITLE NAME STREPT ADDRESS CITY-ST-7P TITLE NAME STREPT ADDRESS CITY-ST-7P TITLE NAME STREPT ADDRESS CITY-ST-7P TITLE TITLE NAME STREPT ADDRESS CITY-ST-7P TITLE	SIGNATURE.	Signature, typed or printed name of registered agent and little if applicable.	(NOTE: Registered Agent signs	sture required when reinstating)	DATE
TITLE MARE STRET ADRESS CITY-ST-7P TITLE MARE STREET ADRESS CITY-ST-7P TITLE STREET ADRESS CITY-STREET ADRESS CI	Fi Di	ling Fee is \$50.00 ue by May 1, 2005		·	
NAME STREET ADDRESS CITY-ST-7IP ST. PETERSBURG, FL.  TITLE NAME STREET ADDRESS CITY-ST-7IP STREET ADDRESS CITY-STREET	TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGRM FARRELL, KATHLEEN L 316 21ST AVE. NE ST. PETERSBURG, FL 33704			
NAME STREET ADDRESS CITY-ST-7IP  TITLE NAME STREET ADDRESS CITY-ST-7IP	NAME Street Address	HARPER, LINDA S 316 21ST AVENUE NE			
STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME NAME	name Street address		<b>-</b>	DO NOT	WRITE
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	NAME Street address			IN THIS	SPACE
NAME	NAME STREET ADDRESS		•		
SIRE! ADDRESS  CRY-ST-ZIP  11. I hereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information	name Street address Cify-St-ZiP				

11. Thereby certify that the information supplied with this fitting does not quality for the exemption stated in Section 119.07(3)(i). Honda 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 outh; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

KATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIV

14/12/05 727-822-1015

Daytime Phone #