

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000879

FILED
Jun 30, 2005
Secretary of State

Entity Name: MOORE AND WAKSLER, P.L.

Current Principal Place of Business:

1107 WEST MARION AVENUE
SUITE 112
PUNTA GORDA, FL 33950 US

New Principal Place of Business:

Current Mailing Address:

1107 WEST MARION AVENUE
SUITE 112
PUNTA GORDA, FL 33950 US

New Mailing Address:

FEI Number: 65-0773617 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MOORE, JAMES E III
1107 WEST MARION AVENUE
SUITE 112
PUNTA GORDA, FL 33950 US

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/MANAGERS:

Title: MGRM () Delete
Name: MOORE, JAMES E III
Address: 1107 WEST MARION AVENUE, SUITE 112
City-St-Zip: PUNTA GORDA, FL 33950 US

Title: MGRM () Delete
Name: WAKSLER, GERRI L
Address: 1107 WEST MARION AVENUE, SUITE 112
City-St-Zip: PUNTA GORDA, FL 33950 US

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: JAMES E. MOORE, III

MGRM

06/30/2005

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