## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L98000000202

Entity Name: CEREBSYS, L.C.

FILED May 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 8295 630 NE ZEBRINA SENDA PORT ST LUCIE, FL 34985 JENSEN BEACH, FL 34957

Current Mailing Address: New Mailing Address:

P.O. BOX 8295 630 NE ZEBRINA SENDA PORT ST LUCIE, FL 34985 JENSEN BEACH, FL 34957

FEI Number: 52-2082670 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:

GERDES, MATTHEW
2317 SW NORTON STREET
PORT ST LUCIE, FL 349532261 US
GERDES, MATTHEW
630 NE ZEBRINA SENDA
JENSEN BEACH, FL 34957 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: 05/16/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGR Title: (X) Change ( ) Addition () Delete GERDES, BRENDA GERDES, CHRISTINE Name: Name: Address: 9307 S. INDIAN RIVER DRIVE Address: 630 NE ZEBRINA SENDA City-St-Zip: ST PIERCE, FL 34982 City-St-Zip: JENSEN BEACH, FL 34957

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GERDES, CLARENCE
 Name:

 Address:
 9307 S. INDIAN RIVER DRIVE
 Address:

 City-St-Zip:
 ST PIERCE, FL 34982
 City-St-Zip:

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GERDES, MATTHEW
 Name:

 Address:
 2317 SW NORTON ST
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34953
 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: MATTHEW GERDES PRES 05/16/2005