

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000067

Entity Name: THE LAMPLIGHTER, L.C.

FILED
Jun 06, 2005
Secretary of State

Current Principal Place of Business:

721 NE 3RD AVENUE
FORT LAUDERDALE, FL 33304

New Principal Place of Business:

Current Mailing Address:

721 NE 3RD AVENUE
FORT LAUDERDALE, FL 33304

New Mailing Address:

FEI Number: 65-0885562 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:

CLARK, THOMAS M
2400 EAST COMMERCIAL BLVD., SUITE 820
FT LAUDERDALE, FL 33308 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/MEMBERS:

Title: MGR () Delete
Name: DOERING, RALPH H III
Address: 1201 S.E. 2ND COURT, #104
City-St-Zip: FT LAUDERDALE, FL 33301

Title: MGR () Delete
Name: DOERING, JOHN C
Address: 1201 S.E. 2ND COURT, #104
City-St-Zip: FT LAUDERDALE, FL 33301

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DOERING, RALPH H III
Address: 721 NE 3RD AVE
City-St-Zip: FT LAUDERDALE, FL 33304

Title: MGR (X) Change () Addition
Name: DOERING, JOHN C
Address: 721 NE 3RD AVE
City-St-Zip: FT LAUDERDALE, FL 33304

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: RALPH H. DOERING, III

MGR

06/06/2005

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