

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000723

**FILED**  
**Mar 08, 2005**  
**Secretary of State**

**Entity Name:** LOA OF SOUTHWEST FLORIDA, L.C.

**Current Principal Place of Business:**

12408 SW SHERI AVENUE  
LAKE SUZY, FL 34269

**New Principal Place of Business:**

12135 SW EGRET CIRCLE  
LAKE SUZY, FL 34269

**Current Mailing Address:**

12408 SW SHERI AVENUE  
LAKE SUZY, FL 34269

**New Mailing Address:**

12135 SW EGRET CIRCLE  
LAKE SUZY, FL 34269

FEI Number: 20-0435010

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHEPARD, DAVID  
12408 SW SHERI AVENUE  
LAKE SUZY, FL 34269 US

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

SHEPARD, DAVID  
12135 SW EGRET CIRCLE  
LAKE SUZY, FL 34269 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: DAVID SHEPARD

03/08/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SHEPARD, DAVID  
Address: 12408 SW SHERI AVENUE  
City-St-Zip: LAKE SUZY, FL 34269

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SHEPARD, DAVID  
Address: 12135 SW EGRET CIRCLE  
City-St-Zip: LAKE SUZY, FL 34269

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: DAVID SHEPARD

MGRM

03/08/2005

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