


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 25, 2005 08:00 A
Secretary of State

DOCUMENT # L99000001238 1. Entity Name UCD, L.C.	
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Principal Place of Business 1130 VERNON PLACE MARCO ISLAND, FL 34145	Mailing Address 1130 VERNON PLACE MARCO ISLAND, FL 34145
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DO NOT WRITE IN THIS SPACE



04182005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3569656	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MORRIS, WILLIAM G ESQ
247 NORTH COLLIER BOULEVARD, SUITE 202
MARCO ISLAND, FL 34145

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retreating)

**Filing Fee is \$50.00
Due by May 1, 2005**

U00000330080
04/25/05-80144-011 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DRESCHER, EWE 1130 VERON PLACE MARCO ISLAND, FL 34145
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11. I hereby certify that the information supplied with this filing does not qualify 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 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:

Christle Drescher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04/20/05 *239 394 8219*
Date Daytime Phone #