

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002493

Entity Name: SANBAR HOLDINGS, L.L.C.

FILED  
Jan 28, 2005  
Secretary of State

**Current Principal Place of Business:**

2625 PARK TOWER  
400 N. TAMPA ST.  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 270306  
TAMPA, FL 33688

**New Mailing Address:**

FEI Number: 59-3571948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARRISON, SHAWN E  
2625 PARK TOWER, 400 N. TAMPA  
TAMPA, FL 33602 US

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

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: MGRM ( ) Delete  
Name: HARRISON, SHAWN E  
Address: 2625 PARK TOWER, 400 N. TAMPA ST.  
City-St-Zip: TAMPA, FL 33602

Title: MGRM ( ) Delete  
Name: JAAP, MICHAEL J  
Address: 10710 CARROLLWOOD DR  
City-St-Zip: TAMPA, FL 33618

Title: MGRM ( ) Delete  
Name: MATTSON, ERIC B  
Address: 12031 BREWSTER DR  
City-St-Zip: TAMPA, FL 33626

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL J. JAAP

MGRM

01/28/2005

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