

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000005496

**FILED**  
**Feb 21, 2005**  
**Secretary of State**

**Entity Name:** SABALA L.L.C.

**Current Principal Place of Business:**

2351 ALAQUA DRIVE  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

2351 ALAQUA DRIVE  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

BARON, STEPHEN  
2351 ALAQUA DRIVE  
LONGWOOD, FL 32779    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: BARON, STEPHEN  
Address: 2351 ALAQUA DRIVE  
City-St-Zip: LONGWOOD, FL

Title: MGRM    ( ) Delete  
Name: BARON, BRETT  
Address: 2351 ALAQUA DRIVE  
City-St-Zip: LONGWOOD, FL

Title: MGRM    ( ) Delete  
Name: BARON, TOD  
Address: 2351 ALAQUA DRIVE  
City-St-Zip: LONGWOOD, FL

**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: STEPHEN BARON

MGRM

02/21/2005

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