2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State
04-28-2005 90030 037 ****50.00

DOCUMENT # L99000005688

1. Entity Name
CONTROL CENTER, L.L.C.

Principal Place of Business	Mailing Address
300 SUNPORT LANE SUITE 100 ORLANDO, FL 32809	300 SUNPORT LANE SUITE 100 ORLANDO, FL 32809

01252005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3597018 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
YERGEY, DAVID A JR. 211 N. MAGNOLIA AVENUE ORLANDO, FL 32801	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 reinstating)

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR TURNER, MARCUS B ?00 SUNPORT LANE, SUITE 100 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR TURNER, MARCUS B 300 SUNPORT LANE, SUITE 100 ORLANDO, FL 32809	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR MICHAEL, THOMAS 1090 31ST AVE VERO BEACH, FL 32960	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR THOMAS, MICHAEL 528 LAKE COVE POINTE CIRCLE WINTER GARDEN, FL 34787	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RASHY, DANIEL 2268 GRAND TREE CT LAKE MARY, FL 32746	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR RASHY, DANIEL 3339 REGAL CREST DR LONGWOOD, FL 32779	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BROOKS, JOHN 9345 BUTTONWOOD ST ORLANDO, FL 32825	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR KNOTT, ROBERT 100 GLEN CLUB CT DEBARY, FL 32713	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FADELEY, BRETT 1378 S. RIDGE LACE CIRCLE LONGWOOD, FL 32750	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FADELEY, BRETT 1378 S. RIDGE LAKE CIRCLE LONGWOOD, FL 32750.	☒ Change ☐ Addition

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: By: _____, Manager DANIEL RASHY 4/26/05 (407) 304-5200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #