

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000006877 1. Entity Name J.E. LANNI L.C. —	
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Principal Place of Business 3827 FOX RIDGE ZEPHYRHILLS, FL 33543	Mailing Address 3827 FOX RIDGE ZEPHYRHILLS, FL 33543
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DO NOT WRITE IN THIS SPACE



07062005No Chg-LLC

CR2E083 (10/03)

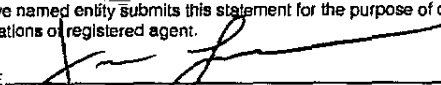
4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LANNI, JAMES E
3827 FOX RIDGE
ZEPHYRHILLS, FL 33543

**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:  (NOTE: Registered Agent signature required when reissuing) DATE: 6-7-05

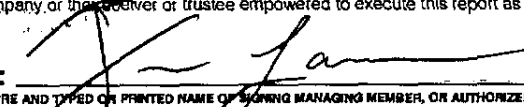
**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANNI, JAMES E II 3827 FOXRIDGE ZEPHYRHILLS, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LANNI, KATLYN J 3827 FOXRIDGE ZEPHYRHILLS, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LANNI, JAMES SR. 3827 FOXRIDGE ZEPHYRHILLS, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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07/08/05-80015-008 50.00

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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:  DATE: 6-7-05 (813) 7882260

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