2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000008672

1. Entity Name

NAME STREET ADDRESS CITY-ST-ZIP

ECONOMY TRANSPORT OF FLORIDA, L.L.C.



Principal Place of Business

C/O C. PHILIP CAMPBELL, IR. 101 EAST KENNEDY BOULEVARD, SUITE 3800 TAMPA, FL 33602 Mailing Address

C/O C. PHILIP CAMPBELL, IR. 101 EAST KENNEDY BOULEVARD, SUITE 3800 TAMPA, FL 33602

FILED Apr 04, 2005 8:00 am Secretary of State

04-04-2005 90422 043 ****55.00

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02142005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number			Applied For	
38-3505076			Not Applicable	
5. Certificate of Status Desired	КX	\$5.00 Additional Fee Required		

•

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changions of registered agent.	ing its registere	d office or registered agent, or both	ı, in the State of Florida. I am familiar	with, and accept
SIGNATURE.					
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE	
Fi De	ling Fee is \$50.00 ue by May 1, 2005				
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM		· ·	•	·
NAME	MOROUN, MANUEL J				
STREET ADDRESS	101 EAST KENNEDY BOULEVARD, SUITE 2800				•
CITY-ST-ZIP	TAMPA, FL 33602				
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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: X From & Man

March 22, 2005 (586) 939-7000

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

Date

Daytime Phone #