


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000009002
 1. Entity Name
 OMEGA SPECIAL SERVICES, LLC



Principal Place of Business Mailing Address
 222 WEST GEORGIA ST. -- PO BOX 1050
 TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32302



01182005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 59-3614333 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 LEWIS & WHITE, L.C.
 222 WEST GEORGIA ST.
 TALLAHASSEE, FL 32301

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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 reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

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 04/30/05 08:20 006 58.80

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LEWIS, A. E 222 WEST GEORGIA ST. TALLAHASSEE, FL 32301
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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)(f), 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: *A. Wayne Lewis* 4-28-05 425-5000
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #