2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2005 08:00 AM
Secretary of State

DOCUMENT # L99000009039

1. Entity Name
NTIC, LLC

Principal Place of Business	Mailing Address
14302 BRUCE B. DOWNS BLVD. TAMPA, FL 33613	P.O. BOX 3377 BRANDON, FL 33511

01202005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3632078
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WYLIE, WARREN W II
122 LINSLEY AVE., STE A
BRANDON, FL 33511

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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 _____ 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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ANDREW MESSINA M.D.
STREET ADDRESS	14302 BRUCE B. DOWNS BLVD.
CITY-ST-ZIP	TAMPA, FL 33613
TITLE	MGRM
NAME	CARROLL, DAVID R M.D.
STREET ADDRESS	14302 BRUCE B. DOWNS BLVD.
CITY-ST-ZIP	TAMPA, FL 33613
TITLE	MGRM
NAME	WYLIE, WARREN W II
STREET ADDRESS	14302 BRUCE B. DOWNS BLVD.
CITY-ST-ZIP	TAMPA, FL 33613
TITLE	MGRM
NAME	BEKHOR, DAVID
STREET ADDRESS	14302 BRUCE B. DOWNS BLVD.
CITY-ST-ZIP	BRANDON, FL 33613
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100001242323
02/24/05-80082-017 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: Warren W. Wylie, II 1/20/05 (813) 657-4914
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #