
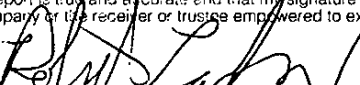


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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<b>DOCUMENT # M02000001202</b> 1. Entity Name 3001 AD LIMITED LIABILITY COMPANY		 <div style="position: absolute; top: 0; right: 0; text-align: right;"> <b>FILED</b>  <b>JUN 24 AM 8:52</b>  <b>TALLAHASSEE, FLORIDA</b> </div>	
Principal Place of Business 2000 GARNER STATION BLVD., STE. #2014 RALEIGH, NC 27603		Mailing Address 525 S. FLAGLER DR., #301 WEST PALM BEACH, FL 33401	
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address 430 S. Congress Ave Suite 2 Delray Beach, FL 33445	
City & State Raleigh, NC		City & State Delray Beach, FL	
Zip 27603		Zip 33445	
Country USA		Country USA	
6. Name and Address of Current Registered Agent  BARKER, JIMMY 525 S. FLAGLER DR., STE. 301 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name: Jimmy Barker Street Address (P.O. Box Number is Not Acceptable): 430 S. Congress Avenue Suite 2 City: Delray Beach FL Zip Code: 33445	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		<b>Make check payable to Florida Department of State</b>	
<b>9. MANAGING MEMBERS/MANAGERS</b>		<b>10. ADDITIONS/CHANGES</b>	
TITLE	MGRM <input type="checkbox"/> Delete	TITLE	430 S. Congress Ave #2 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARKER, JIMMY	NAME	
STREET ADDRESS	525 S. FLAGLER DR. #301	STREET ADDRESS	430 S. Congress Ave #2
CITY-ST-ZIP	WEST PALM BEACH, FL 33401	CITY-ST-ZIP	Delray Beach, FL 33445
TITLE	MGRM <input type="checkbox"/> Delete	TITLE	500056575285 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LADRACH, ROBERT	NAME	
STREET ADDRESS	2000 GARNER STATION BLVD. #2014	STREET ADDRESS	06/27/05--01042--021 **1172.50
CITY-ST-ZIP	RALEIGH, NC 27603	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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.			
<b>SIGNATURE</b> 		6/6/05 (501) 212-2456	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	