## **2005 LIMITED LIABILITY COMPANY**

## **ANNUAL REPORT** DOCUMENT # M02000002947 1. Entity Name FOURTH DIMENSION, L.L.C.

**FILED** Jan 29, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2297LIGHTHOUSE CIR. FERNANDINA BEACH, FL 32034

229 LIGHTHOUSE CIR.

FERNANDINA BEACH, FL 32034



DO I	TOM	WRITE	IN THIS	SPACE
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01122005 No Chg-LLC	CH2E083 (10/03)		
4. FEI Number		Applied For	
58-2179099		Not Applicable	
5. Certificate of Status Desired		\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent KITCHINGS, PAMELA M DO NOT WRITE 229 LIGHTHOUSE CIR. FERNANDINA BEACH, FL 32034 IN THIS SDACE

		IN THIS SPACE		
8. The above the obligat	named entity submits this statement for the purpose of changing ions of registered agent.	its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE	Signature, typod or printed name of registered agent and little if applicable. (I	OTE, Registered Agent signature required when reinstating)  DATE		
Filing Fee is \$50.00 Due by May 1, 2005				
9.	· MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAFFEY, MATTHEW E 229 LIGHTHOUSE CIR. FERNANDIÑA BEACH, FL 32034	U00000204111		
THILE NAME STREET ADDRESS CITY-ST-ZIP		01/29/05-80056-017 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS 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 odith; that I am a managing member or manager of the limited liability company cycling receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORISED REPRESENTATIVE

MATTHEW