2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2005
Secretary of State

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Entity Name: WELMAN SPERIDES ARCHITECTS, LLC

Current Principal Place of Business:

8500 NORMANDALE LAKE BLVD., SUITE 955
BLOOMINGTON, MN 55437

New Principal Place of Business:

7700 FRANCE AVENUE SOUTH
SUITE 375
EDINA, MN 55435

Current Mailing Address:

8500 NORMANDALE LAKE BLVD., SUITE 955
BLOOMINGTON, MN 55437

New Mailing Address:

7700 FRANCE AVE SOUTH
SUITE 375
EDINA, MN 55435

FEI Number: 41-1908560 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LOUIS BAKKALAPULO, P.A.
111 NORTH BELCHER ROAD, SUITE 201
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: WELMAN, MICHAEL
Address: 21675 LONG VIEW DRIVE, #500
City-St-Zip: WAUKESHA, WI 53186

Title: MGRM ( ) Delete
Name: SPERIDES, NICHOLAS S
Address: 8500 NORMANDALE LAKE BLVD., SUITE 955
City-St-Zip: BLOOMINGTON, MN 55437

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: SPERIDES, NICHOLAS S
Address: 7700 FRANCE AVENUE S
City-St-Zip: EDINA, MN 55435

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: NICHOLAS S SPERIDES MR 01/12/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date