


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # M98000000343 1. Entity Name SELDEN FAMILY ENTERPRISES, L.C.	
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Principal Place of Business 959 LINWOOD ROAD BIRMINGHAM, AL 35222	Mailing Address 959 LINWOOD ROAD BIRMINGHAM, AL 35222
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DO NOT WRITE IN THIS SPACE



04192005No Chg-LLC CR2E083 (10/03)

4. FEI Number 63-1192938	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ACKERMAN, DAVID P ESQ. ACKERMAN, LINK & SARTORY, P.A. 222 LAKEVIEW AVENUE, SUITE 1250 WEST PALM BEACH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

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**

04/21/05-80085-016 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SELDEN, A. INGE III 959 LINWOOD ROAD BIRMINGHAM, AL 35222
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IN THIS SPACE**

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: A. Inge Selden III Manager 4/19/05 (205) 254-1056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #