2005 LIMITED LIABILITY COMPANY , ANNUAL REPORT

Apr 09, 2005 08:00 AM Secretary of State DOCUMENT # M98000000977 1. Entity Name 4000 GOLDENROD, LLC Principal Place of Business Mailing Address 255 SOUTH COUNTY ROAD 255 SOUTH COUNTY ROAD PALM BEACH, FL 33480 PALM BEACH, FL 33480 01062005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0865386 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulared when rematating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME TANPAC ALLIANCE, LLC 255 SOUTH COUNTY ROAD STREET ADDRESS PALM BEACH, FL 33480 CITY-ST-ZP THE MAME STREET ADDRESS CITY-ST-ZIP TIRE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CHY-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 Statules. 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

PRINTED HARRE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

SIGNATURE AND TYPED O

FILED

Daytime Phone #