

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028592

**FILED**  
**Feb 26, 2005**  
**Secretary of State**

**Entity Name:** BLINCOE, LLC

**Current Principal Place of Business:**

243 REGENCY ST.  
DAVENPORT, FL 33896

**New Principal Place of Business:**

528 KNIGHTSBRIDGE CIRCLE  
DAVENPORT, FL 33896

**Current Mailing Address:**

243 REGENCY ST.  
DAVENPORT, FL 33896

**New Mailing Address:**

PO BOX 547  
LOUGHMAN, FL 33858

**FEI Number:** 13-4217931

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: BLINCOE, JOHN STEVEN II  
Address: 243 REGENCY ST.  
City-St-Zip: DAVENPORT, FL 33896

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BLINCOE, JOHN STEVEN II  
Address: PO BOX 547  
City-St-Zip: LOUGHMAN, FL 33858

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: JOHN STEVEN BLINCOE II

MGRM

02/26/2005

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