


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000000963
 1. Entity Name
 MARY ANN APARTMENTS, L.L.C.



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| Principal Place of Business 9414 SPRING HILL DRIVE SPRING HILL, FL 34608 | Mailing Address 9414 SPRING HILL DRIVE SPRING HILL, FL 34608 |
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DO NOT WRITE IN THIS SPACE



03212005No Chg-LLC CR2E083 (10/03)

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|---|--------------------------------|
| 4. FEI Number 59-3648275 | 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
 ROETMAN, THOMAS
 9414 SPRING HILL DRIVE
 SPRING HILL, FL 34608

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 _____ (NOTE: Registered Agent signature required when restating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
 Due by May 1, 2005**

1100000314458
 04/18/05-80166-024 50.00

9. MANAGING MEMBERS/MANAGERS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | M ROETMAN, THOMAS 9414 SPRING HILL DRIVE SPRING HILL, FL 34608 |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Thomas Roetman THOMAS ROETMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date: 4/1/05 Daytime Phone #: 352-688-6779