2005 LIMITED LIABILITY COMPANY

SIGNATURE: .

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Apr 27, 2005 08:00 AM Secretary of State

Daytme Phone #

ANNUAL REPORT				Apr 27, 2005 08:00	
DOCL	MENT # L0000001	726		36	ecretary of Stat
1. Entity Name BRCH OAKS PLAZÁ, L.C.					
!	ce of Business	Mailing Address	 -	,	
800 MEADOWS ROAD 800 MEADOWS ROAD 80CA RATON, FL 33486 80CA RATON, FL 33486					
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r				03292005 No Chg-LLC	CR2E083 (10/03)
DO NOT WRITE IN THIS SPA			CE	4. FEI Number	Applied For
a				65-1042224	Not Applicable \$5.00 Additional
				5. Certificate of Status Desired	Fee Required
	6. Name and Address of Current	Registered Agent			
RISNER, PAUL E ESQ. 800 MEADOWS ROAD			DO NOT WRITE		
BOCA RATON, FL 33486			IN THIS SP	ACE	
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, typod or printed name of registered agent and falle if applicable, (NOTE. Registered Agent signature required when reinstating). DATE					
Filing Fee is \$50.00 Due by May 1, 2005					
Q.	MANAGING MEMBI	EQUITATION OF THE			
TITLE	MGR MEMBE	IND/MAINAGEND	1		
NAME STREET ADDRESS	BRCH CORPORATION 800 MEADOWS ROAD		ł	=	
CITY-ST-ZIP	BOCA RATON, FL. 33486				ļ
TITLE NAME					
STREET ADDRESS				U0000 U0000	10337534 1-80170-020 55.00
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TITLE]	IN THIS SP	ACE
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CITY-ST-ZIP		<u> </u>		1 	
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CITY-SI-ZIP			}		
NAME			}		}
STREET ADDRESS CITY-ST-ZIP	_	ear of the		The state of the s	
	ertily that the information supplied with	this filling does not qualify for the exemplant on signature that	mption stated in Sec	The first of the second	urther certify that the information
limited lia	ertify that the information supplied with on this report is true and accurate and oility company of ine receiver or trustee	ampowered to execute this report as	required by Chaple	r 608, Florida Statutes.	ig member or manager of the