

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003091

FILED
Apr 16, 2005
Secretary of State

Entity Name: CENTRECORP REALTY SERVICES, LLC

Current Principal Place of Business:

ONE NORTH CLEMATIS STREET
SUITE 305
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

ONE NORTH CLEMATIS STREET
SUITE 305
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 65-1081334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIENER, DAVID J
ONE NORTH CLEMATIS STREET
STE 305
WEST PALM BEACH, FL 33401 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: PRESTON, JOHN W
Address: ONE NORTH CLEMATIS STREET STE 305
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: KOSOY, DAVID
Address: ONE NORTH CLEMATIS STREET STE 305
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: HAMILTON, TOM
Address: ONE NORTH CLEMATIS STREET STE 305
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: KOSOY, BRIAN
Address: ONE NORTH CLEMATIS STREET STE 305
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGRM () Delete
Name: GREEN, ROBERT S
Address: 2851 JOHN STREET SUITE ONE
City-St-Zip: MARKHAM ONT, CN L3R 5R7

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TOM HAMILTON

MGRM

04/16/2005

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