2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028031

Address:

City-St-Zip:

255 ALHAMBRA CIRCLE STE. 325

CORAL GABLES, FL 33134

Entity Name: BUILDER'S PROPERTY GROUP, LLC

FILED Jan 06, 2005 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|---|---|---|--|
| 255 ALHA | SHORE LAND GROUP, INC. MBRA CIRCLE, STE. 325 ABLES, FL 33134 | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 255 ALHA | SHORE LAND GROUP, INC. MBRA CIRCLE, STE. 325 ABLES, FL 33134 | | | |
| FEI Number | : 03-0524820 FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address | Name and Address of New Registered Agent: | |
| C/O BAYS 255 ALHA | R, CHRISTOPHER J SHORE LAND GROUP, INC. MBRA CIRCLE, STE. 325 ABLES, FL 33134 US | | | |
| | e named entity submits this statement for the e of Florida. | purpose of changing its registere | ed office or registered agent, or both | |
| SIGNATU | RE: | | | |
| | Electronic Signature of Registered Ac | gent | Date | |
| MANAGING MEMBERS/MEMBERS: | | ADDITIONS/CHANGES: | | |
| Title: Name: Address: City-St-Zip: | MGR () Delete MACNAIR, CHRISTOPHER J 255 ALHAMBRA CIRCLE, STE. 325 CORAL GABLES, FL 33134 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MGR () Delete FERTIG, JAY 255 ALHAMBRA CIRCLE, STE. 325 CORAL GABLES, FL 33134 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MGRM () Delete GRIZZLE, GENE 9712 SW 132ND PL MIAMI, FL 33186 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | MGRM (X) Delete BAYSHORE LAND GROUP,, INC. | Title: Name: | () Change () Addition | |

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.

Address:

City-St-Zip:

SIGNATURE: CHRISTOPHER J. MACNAIR 01/06/2005