2006 LIMITED LIABILITY COMPANY

Jun 30, 2006 8:00 am Secretary of State ANNUAL REPORT 05-15-2006 90241 029 *****5.00 **DOCUMENT # L02000033673** 06-30-2006 90059 024 ****45.00 **BLUM PROPERTIES, LLC** Principal Place of Business Mailing Address 101 ANN STREET, SUITE 301 101 ANN STREET, SUITE 301 KEY WEST, FL 33040 KEY WEST, FL 33040 05112006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 43-7987149 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPOTTSWOOD, JOHN M DO NOT WRITE **500 FLEMING STREET** KEY WEST, FL 33040 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retracting) DATE Filing Fee is \$50.00 Due by September 6, 2008 MANAGING MEMBERS/MANAGERS 9. MGR TITLE BLUM, GARY M NAME STREET ADDRESS 101 ANN STREET, SUITE 301 CПY-\$1-ZIP KEY WEST, FL 33040 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE MILE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

NATE. 4 STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Noy 21/2004 Daytime Phone #