

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029552

FILED  
Apr 26, 2005  
Secretary of State

Entity Name: FCC FINANCING SUBSIDIARY I, LLC

**Current Principal Place of Business:**

515 N. FLAGLER DR, SUITE 700  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

515 N. FLAGLER DRIVE  
STE 700  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

515 N. FLAGLER DR, SUITE 700  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

515 N. FLAGLER DRIVE  
SUITE 700  
WEST PALM BEACH, FL 33401

FEI Number: 20-0158009

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PENINSULA REGISTERED AGENTS, INC.  
200 S. BISCAYNE BLVD, 40TH FLOOR  
MIAMI, FL 331312310 US

**Name and Address of New Registered Agent:**

SUNSHINE, MARK A  
515 N. FLAGLER DRIVE  
SUITE 700  
WEST PALM BEACH, FL 33401 US

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: MARK A. SUNSHINE

04/26/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: CFO ( ) Delete  
Name: SUNSHINE, MARK  
Address: 515 N. FLAGLER DR., STE. 700  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SUNSHINE, MARK A  
Address: 515 N. FLAGLER DR., STE. 700  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR ( ) Change (X) Addition  
Name: KIEFER, JOHN W  
Address: 515 N. FLAGLER DRIVE, STE 700  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR ( ) Change (X) Addition  
Name: HOWARTH, DENNIS  
Address: 100 CANAL POINTE BLVD. STE 708  
City-St-Zip: PRINCETON, NJ 08540

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: MARK A. SUNSHINE

MGR

04/26/2005

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