# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jun 30, 2005**
**Secretary of State**

DOCUMENT# L04000055358

**Entity Name:** LIGHTHOUSE PROPERTIES, LLC

**Current Principal Place of Business:**

160 COQUINA KEY DRIVE
ORMOND BEACH, FL 32086 US

**New Principal Place of Business:**

**Current Mailing Address:**

160 COQUINA KEY DRIVE
ORMOND BEACH, FL 32086 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.**

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

WELCH, MATTHEW S
222 SEABREEZE BLVD
DAYTONA BEACH, FL 32118 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/MANAGERS:**

Title: MGRM ( ) Delete
Name: BARKER, KENNETH
Address: 160 COQUINA KEY DRIVE
City-St-Zip: ORMOND BEACH, FL 32086 US

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

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition
Name: BARKER, KENNETH
Address: 160 COQUINA KEY DRIVE
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: MGRM ( ) Change (X) Addition
Name: BARKER, PAULA L
Address: 160 COQUINA KEY DRIVE
City-St-Zip: ORMOND BEACH, FL 32176 US

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: KENNETH B BARKER MGRM 06/30/2005

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