

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Feb-24, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # L02000032568**

**1. Entity Name  
TOWER PROPERTIES, LLC**



**Principal Place of Business**

**613 OAKFIELD DRIVE  
BRANDON, FL 33511**

**Mailing Address**

**122 LINSLEY AVE  
STE A  
BRANDON, FL 33511**



01202005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number  
74-3071548**

**Applied For  
Not Applicable**

**5. Certificate of Status Desired**



**\$5.00 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WYLIE, WARREN W II  
122 LINSLEY AVE, STE A  
BRANDON, FL 33511**

**DO NOT WRITE  
IN THIS SPACE**

**6. 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**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**  
MGRM  
NANNI, M. DOUGLAS  
613 OAKFIELD DR  
BRANDON, FL 33511

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**  
MGRM  
SILVERSTEIN, JOANTHAN S  
613 OAKFIELD DR  
BRANDON, FL 33511

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**  
MGRM  
BEKHOR, DAVID  
613 OAKFIELD DR  
BRANDON, FL 33511

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

000000242320  
02/24/05-80082-016 50.00

**DO NOT WRITE  
IN THIS SPACE**

**11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*Jonathan Silverstein*

*1/20/05*

*(813) 657-4914*

Date

Daytime Phone #