2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# L04000042762

Entity Name: HONEYCUT RANCH, L.L.C.

Current Principal Place of Business:

24200 HIGHWAY 27
LEESBURG, FL 34748 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 547602
ORLANDO, FL 32854 US

New Mailing Address:

24200 US HIGHWAY 27
LEESBURG, FL 34748 US

FEI Number: 20-1211039 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEATHERFORD, WILLIAM P JR.
1150 LOUISIANA AVENUE
SUITE 4
WINTER PARK, FL 32789 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/MEMBERS:

Title:	MGR	( ) Delete
Name:	MCLEAN, DAVID M	
Address:	1240 ALEXANDRA COURT	
City-St-Zip:	ORLANDO, FL 32804 US	
Title:	MGR	( ) Delete
Name:	MCLEAN, SARA JO	
Address:	1240 ALEXANDRA COURT	
City-St-Zip:	ORLANDO, FL 32804 US	
Title:	MGR	( ) Delete
Name:	HOLIMAN, MARY BETH	
Address:	24200 HIGHWAY 27	
City-St-Zip:	LEESBURG, FL 34748 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: MARY BETH HOLIMAN MGR 04/13/2005

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