

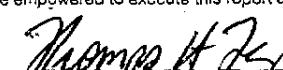


FILED
May 06, 2005 08:00 AM
Secretary of State

DOCUMENT # A93000000321				Secretary of State	
1. Entity Name TAYLOR RANCH, LTD.					
Principal Place of Business 401 COMMERCIAL COURT SUITE A VENICE, FL 34292		Mailing Address 401 COMMERCIAL COURT SUITE A VENICE, FL 34292			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04052005 Chg-LP CR2E003 (10/03)	
City & State		City & State		4. FEI Number 65-0409446	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fees Required	
6. Name and Address of Current Registered Agent WEEMS, RUTH B 401 COMMERCIAL COURT SUITE A VENICE, FL 34292				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$8,910,000.00		10. Amount of Capital Contributions in FLORIDA to date. \$8,910,000.00			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	L35710	STREET ADDRESS	05/05/05-80013-006 535.00		
NAME	TAYLOR RANCH, INC.	CITY-ST-ZIP			
STREET ADDRESS	401 COMMERCIAL COURT SUITE A	STREET ADDRESS			
CITY-ST-ZIP	VENICE, FL 34292	CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS			
NAME		CITY-ST-ZIP			
STREET ADDRESS		STREET ADDRESS			
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NAME		CITY-ST-ZIP			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.					
SIGNATURE: 		TAYLOR RANCH, INC. 4-7-05 (941) 493-8549 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #			