


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 07, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000002527**  
 1. Entity Name  
 SOUTH RIVERWALK INVESTMENTS, L.L.C.



Principal Place of Business CORNERSTONE ONE 1200 SOUTH PINE ISLAND ROAD, SUITE 475 PLANTATION, FL 33324	Mailing Address CORNERSTONE ONE 1200 SOUTH PINE ISLAND ROAD, SUITE 475 PLANTATION, FL 33324
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**DO NOT WRITE IN THIS SPACE**



02042005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 94-1687665	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HEALY, CHARLOTTE A  
 4400 NORTH FEDERAL HIGHWAY, SUITE 42  
 BOCA RATON, FL 33431

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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 \_\_\_\_\_ (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	MGR UNICORN MANAGEMENT COMPANY, INC. 2810 E. OAKLAND PARK BLVD., SUITE 102 FT. LAUDERDALE, FL 33306
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 02/08/05-80028-011 50.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: Charlotte A. Healy, Mgr. Date: 2/4/05 Daytime Phone #: 561-265-4900