

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000006563

**FILED**  
**Jun 29, 2005**  
**Secretary of State**

**Entity Name:** 220 NORTH OCEAN PARTNERS, L.L.C.

**Current Principal Place of Business:**

220 NORTH OCEAN BLVD.  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

6501 MENLO ROAD  
MCLEAN, VA 22101

**New Mailing Address:**

FEI Number: 20-2381880      FEI Number Applied For ( )      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:**

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

ROGERS, DOYLE  
321 ROYAL POINCIANA PLAZA  
PALM BEACH, FL 33480      US

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: CONWAY, JOANNE BARKETT  
Address: 6501 MENLO ROAD  
City-St-Zip: MCLEAN, VA 22101

**ADDITIONS/CHANGES:**

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: JOANNE B. CONWAY

MGRM

06/29/2005

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