2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 30, 2005 08:00 AM Secretary of State DOCUMENT # L00000006880 REDD PROPERTIES II, LLC Principal Place of Business Mailing Address 2727 APALACHEE PARKWAY 2727 APALACHEE PARKWAY TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 04192005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 26-2961864 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent REDD, HARRY L DO NOT WRITE 2727 APALACHEE PARKWAY TALLAHASSEE, FL 32301 IN THIS SPACE 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. Lam familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGRM TITLE REDD, HARRY L NAME STREET ADDRESS 2727 APALACHEE PARKWAY U00000349834 05/02/05-80082-003 50.00 CITY-ST-ZIP TALLAHASSEE, FL 32301 TITLE NAME STREET ADDRESS CiTY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

4-27-05

FILED

850-878-618

Daytime Phone #