2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE

Apr 11, 2005 8:00 am Secretary of State 04-11-2005 90051 005 ****50.00 **DOCUMENT # L00000010387** SIMMONS ESTATE HOMES, L.L.C. 50058110 Principal Place of Business Mailing Address 1090 JUPITER PARK DR 1090 JUPITER PARK DR JUPITER, FL 33458 JUPITER, FL 33458 01112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1090542 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SIMMONS, ROBERT W JR. DO NOT WRITE 6441 RIVER POINTE WAY JUPITER, FL 33478 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. I am 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 MANAGING MEMBERS/MANAGERS MGRM TITLE SIMMONS, ROBERT W JR. NAME STREET ADDRESS 6441 RIVER POINTE WAY CITY-ST-ZIP JUPITER, FL 33478 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 of truetee empowered to execute this report as required by Chapter 608, Florida Statutes.

RE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHO

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