## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Apr 24, 2006 08:00 AM Secretary of State DOCUMENT # L0000014475 WASHINGTON STREET PROPERTIES, LLC Mailing Address Principal Place of Business 538 E. WASHINGTON ST. 538 E. WASHINGTON ST. ORLANDO, FL 32801 ORLANDO, FL 32801 01172006No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3685971 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent OSBORNE, WILLIAM G DO NOT WRITE 538 E. WASHINGTON ST. ORLANDO, FL 32801 IN THIS SPACE 3. 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 lamillar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. DVDTE: Repistered Agent eignature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. TITLE NAME OSBORNE, WILLIAM G 538 E. WASHINGTON ST. STREET ADDRESS 0000000530325 CITY -ST-ZIP ORLANDO, FL 32801 05/05/06-80112-021 50.00 TITLE NAME STREET ADDRESS CHTY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-20 TITLE MARIE STREET ADDRESS

11. I hereby certify that the information supplied with this (ling does not quality for the exemptions contained in Chapter 119, 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 it made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute the report as required by Chapter 608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STITCET ADDRESS CITY-ST-ZIP

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED