2005 LIMITED LIABILITY COMPANY

SIGNATURE:

FILED ANNUAL REPORT Apr 01, 2005 08:00 AM Secretary of State DOCUMENT # L01000000849 1. Entity Name LPK REAL ESTATE HOLDINGS NO. 2, L.L.C. Principal Place of Business Mailing Address 4151 GOLF SHORE BLVD. N. #1005 4151 GOLF SHORE BLVD. N. #1005 NAPLES, FL 34103 NAPLES, FL 34103 03282005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 43-1741464 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KRUPP, LESTER F DO NOT WRITE 4151 GOLF SHORE BLVD., N. #105 NAPLES, FL 34103 IN THIS SPACE 5. 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. Signatura, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGRM TITLE KRUPP, LESTER F NAME 4151 GULF SHORE BLVD, NORTH STREET ADDRESS CITY-ST-ZIP NAPLES, FL 34103 U00000283741 TITLE 04/01/05-80039-024 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 inclicated on this report is true and a feurate 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 recover or trustee amount of the recover of the limited statutes.