2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 23, 2005 08:00 AM Secretary of State

		ILLOWI		Secretary of Stat
DOCUMENT # L0100003847 1. Entity Name MS PROPERTIES, LLC				Secretary of State
•	ice of Business — HOWELL ROAD FL 32751	- Mailing Address 457 LAKE HOWELL ROAD MAITLAND, FL 32751		
DO NOT WRITE IN THIS SPA			ce .	04112005No Chg-LLC CR2E083 (10/03)
			<u></u>	4. FEI Number Applied For S9-3701967 Not Applied For Not Applicable 5. Certificate of Status Desired S5.00 Additional Fee Required
6. Name and Address of Current Registered Agent MARGIO, NINA H 457 LAKE HOWELL ROAD MAITLAND, FL 32751				DO NOT WRITE 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				
	Signature, typed or printed name of registered agent an filling Fee is \$50.00 Due by May 1, 2005	the if applicable. (NOTE Registere	d.Agant signalure required	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER D MARGIO, NINA H 457 LAKE HOWELL RD MAITLAND, FL 32751 D STARKEY, KĀRLA H 457 LAKE HOWELL RD MAITLAND, FL 32751	S/MANAGERS		04/23/05-80051-024 50.00 DO NOT WRITE IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS			_	IN I MIS SPACE

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 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.