2005 LIMITED LIABILITY COMPANY FILED **ANNUAL REPORT** Jan 12, 2005 08:00 AM **DOCUMENT # L01000004442** Secretary of State INDIAN RIVER NO. 1 DEVELOPERS, LLC Principal Place of Business Mailing Address 7860 PETERS ROAD - SUITE F-111 7860 PETERS ROAD - SUITE F-111 FLANTATION, FL 33317 PLANTATION, FL 33317 01032005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4 EEI Number 65-1097718 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent FRAZIER, ROBERT W JR ESQ DO NOT WRITE FRAZIER HOTTE & ASSOCIATES, P.A. 2400 EAST COMMERCIAL BOULEVARD, SUITE 826 IN THIS SPACE FORT LAUDERDALE, FL 33308 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.

(NOTE. Registered Agent signature required when reinstating)

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$50.00 Due by May 1, 2005

MANAGING MEMBERS/MANAGERS 9. MGRM TITLE SADKIN, S. MARTIN NAME STREET ADDRESS 7860 PETERS ROAD - SUITE F-111 CITY-ST-ZIP PLANTATION, FL 33317 MIE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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DATE

DO NOT WRITE IN THIS 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 adcurate 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 regelver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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Applied For

\$5.00 Additional

Fee Required

Not Applicable