2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2005
Secretary of State

DOCUMENT# L01000005296

Entity Name: WILLOW STREET PROPERTIES, LLC

Current Principal Place of Business:

5002 NORTH HOWARD AVE.
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

5002 NORTH HOWARD AVE.
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-3717661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AGLIANO, SAM
5002 N HOWARD AVENUE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: AGLIANO, SAM
Address: 3612 MULLEN AVENUE
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete
Name: AGLIANO, FRANK
Address: 45 SPANISH MAIN
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete
Name: RIVAS, SARAH
Address: 4510 WATROUS AVENUE
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete
Name: AGLIANO, DAVID
Address: 1511 SHERIDAN FOREST
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: AGLIANO, FRANK
Address: 45 SPANISH MAIN
City-St-Zip: TAMPA, FL 33609

Title: MGRM (X) Change ( ) Addition
Name: RIVAS, SARAH
Address: 4510 WATROUS AVENUE
City-St-Zip: TAMPA, FL 33629

Title: MGRM (X) Change ( ) Addition
Name: AGLIANO, DAVID
Address: 1511 SHERIDAN FOREST
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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.

SIGNATURE: JAY SEFCHICK CFO 03/09/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date