

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006929

FILED
Apr 21, 2004
Secretary of State

Entity Name: VIRTUAL POINT DEVELOPMENT LLC

Current Principal Place of Business:

17226 PANAMA CITY BEACH PKWY., STE. 579
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

19211 PANAMA CITY BEACH PKWY., STE. 105
PANAMA CITY BEACH, FL 32413

Current Mailing Address:

17226 PANAMA CITY BEACH PKWY., STE. 579
PANAMA CITY BEACH, FL 32413

New Mailing Address:

19211 PANAMA CITY BEACH PKWY., STE. 105
PANAMA CITY BEACH, FL 32413

FEI Number: 43-1757566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGNESS, PERRY
17218 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32413 US

Name and Address of New Registered Agent:

MAGNESS, PERRY
17218 PANAMA CITY BEACH PARKWAY
PANAMA CITY BEACH, FL 32413 US

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: PERRY MAGNESS

04/21/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MAGNESS, PERRY O
Address: 17226 PCB PARKWAY SUITE #579
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MAGNESS, PERRY O
Address: 17218 PCB PARKWAY SUITE
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

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: PERRY MAGNESS

MM

04/21/2004

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