## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Mar 17, 2005 08:00 AM Secretary of State DOCUMENT # L01000007973 VILLA SAN MARCO PARTNERS, LLC Principal Place of Business Mailing Address 17 LA VISTA DRIVE 17 LA VISTA DRIVE PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 02142005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3726958 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STONEBURNER BERRY & SIMMONS, P.A. DO NOT WRITE 841 PRUDENITAL DRIVE, STE. 140 JACKSONVILLE, FL 32207 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reliestating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE HANAN, JOHN H NAME 17 LA VISTA DR. STREET ADDRESS U00000266352 03/17/05-80027-014 50.00 PONTE VEDRA BEACH, FL. 32082 CITY-ST-ZIP TITLE 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

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(7), Florida Statutes. I further certify that the information inclicated 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.

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CITY - ST- ZIP