2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT **FILED** May 13, 2005 08:00 AM Secretary of State **DOCUMENT # L01000011401** KIMBERLITE RACE FARM, LLC Mailing Address Principal Place of Business C/O CARMELO P. ZAPPULA C/O CARMELO P. ZAPPULA 2231 NE HIGHWAY 41 2231 NE HIGHWAY 41 WILLISTON, FL 32696 Williston, FL 32696 05102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 80-0006653 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZAPPULA, CARMELO_P_ DO NOT WRITE 2231 NE HIGHWAY 41 WILLISTON, FL 32696 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, lyped or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) DATE Filing Fee is \$50.00 Due by September 7, 2005 9. MANAGING MEMBERS/MANAGERS TITLE MGR ZAPPULA, CARMELO P NAME STREET ADDRESS 2231 NE HIGHWAY 41 CITY-ST-ZIP WILLISTON, FL 32696 TITLE U00000366566 NAME 05/13/05-80009-002 50.00 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). 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 of the receiver or trustee epipowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

AND TYPED OR PRINTED NAME

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE