

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 11, 2005 08:00 AM**  
**Secretary of State**

|                                                                         |                                                             |                                                                                   |
|-------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # L01000011478</b>                                          |                                                             |  |
| 1. Entity Name<br>VIDA PROPERTIES, LLC                                  |                                                             |                                                                                   |
| Principal Place of Business<br>1717 ATRIUM DRIVE<br>MELBOURNE, FL 32935 | Mailing Address<br>1717 ATRIUM DRIVE<br>MELBOURNE, FL 32935 |                                                                                   |



03082005No Chg-LLC

CR2E083 (10/03)

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|                                                           |                                |
|-----------------------------------------------------------|--------------------------------|
| 4. FEI Number<br>04-3620454                               | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

|                                                                                                                           |                                       |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| 8. Name and Address of Current Registered Agent<br><br>RODGERS, BENJAMIN F JR<br>1717 ATRIUM DRIVE<br>MELBOURNE, FL 32935 | <b>DO NOT WRITE<br/>IN THIS SPACE</b> |
|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------|

9. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when resigning) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

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

| 9. MANAGING MEMBERS/MANAGERS                   |                                                                            |
|------------------------------------------------|----------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>RODGERS, BENJAMIN F JR<br>1717 ATRIUM DRIVE<br>MELBOURNE, FL 32935 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | MGRM<br>RODGERS, ELISA V<br>1717 ATRIUM DRIVE<br>MELBOURNE, FL 32935       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                            |

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03/11/05-80026-001 50.00

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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)(f), 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** Benjamin F. Rodgers Jr. 09/mar/05 321.242.1464  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #