## **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

SIGNATURE:

## Apr 28, 2005 8:00 am Secretary of State **DOCUMENT # L01000013277** 04-28-2005 90048 001 \*\*\*850 00 GREEN COVE SPRINGS ENTERPRISE, LLC Mailing Address Principal Place of Business 2359 BEVILLE ROAD 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119 DAYTONA BEACH, FL 32119 2. Principal Place of Business 3. Mailing Address 2379 Beville Road 2379 Beville Road Suite, Apt. #, etc. Suite, Apt. #, etc. 02222005 Chg-LLC CR2E083 (10/03) City & State Applied For City & State 4. FEI Number Daytona Beach, Florida Daytona Beach, Florida 59-3736347 Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 32119 **USA** 32119 **USA** Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JONES, CYNTHIA C Street Address (P.O. Box Number is Not Acceptable) 2379 Beville Road 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119 Zip Code 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, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES TIFLE MGRM ☐ Addition ☐ Defete TITLE Change CRESTWOOD 315, INC. NAME NAME STREET ADDRESS 13400 Sutton Park Dr. S. Suite 1402 STREET ADDRESS 9440 PHILLIPS HIGHWAY, #9 CITY-ST-ZIP JACKSONVILLE, FL 32256 CITY-ST-ZIP MGRM TITLE ☐ Delete TITLE Y Change ■ Addition INTERVEST CONSTRUCTION OF JAX, INC. NAME NAME 2379 Beville Road STREET ADDRESS 2359 BEVILLE ROAD STREET ADDRESS CITY-ST-7IP DAYTONA BEACH, FL 32119 CITY-ST-7IE Delete ☐ Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIT) F ☐ Defete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. By: Intervest Construction of Wacksonville, Inc., its Managing Member

AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Morreza Hosseini-Kargar, President 4/2/05 386-788-0820

FILED