2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019932

FILED Feb 03, 2004 Secretary of State

Entity Name: FIVE POINTS PARTNERS LIMITED LIABILITY COMPANY **New Principal Place of Business: Current Principal Place of Business:** 2210 ST. JOHNS AVE. JACKSONVILLE, FL 32204 **Current Mailing Address: New Mailing Address:** 2210 ST. JOHNS AVE JACKSONVILLE, FL 32204 FEI Number: 59-3756813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PURDIE, THOMAS J 2222 ST. JOHNS AVENUE JACKSONVILLE, FL 32204 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete ROOT, RONALD C Name: Name: Address: 2244 ST. JOHNS AVE. Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: Title: MGR Title: () Delete () Change () Addition ROOT, FRAN F Name: Name: Address: 2244 ST. JOHNS AVE. Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PURDIE, THOMAS J Name: Name: 2210 ST. JOHNS AVE. Address: Address: City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip:

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: THOMAS J PURDIE **MGRM** 02/03/2004