

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020692

FILED  
Apr 07, 2005  
Secretary of State

**Entity Name:** COWIE & CRAIG PROPERTIES, L.L.C.

**Current Principal Place of Business:**

6223 SAUTERNE DRIVE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

6223 SAUTERNE DRIVE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:** 59-3755927

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATSON, TODD ATTY  
7785 BAYMEADOWS WAY, SUITE 107  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

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:**

Title: MGR ( ) Delete  
Name: COWIE, ROBERT R D.D.S.  
Address: 6223 SAUTERNE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR ( ) Delete  
Name: CRAIG, JOHN E D.D.S.  
Address: 6223 SAUTERNE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ROBERT R. COWIE

MGR

04/07/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date