2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Apr 12, 2005 08:00 AM Secretary of State **DOCUMENT # L01000021990** 1. Entity Name CASE, LLC Principal Place of Business Mailing Address 3500 SW CORPORATE PKWY 3500 SW CORPORATE PKWY PALM CITY, FL 34990 PALM CITY, FL 34990 01112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FE! Number Applied For 02-0539757 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SABIN, CHARLES H DO NOT WRITE 3500 SW CORPORATE PKWY PALM CITY, FL 34990 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tille if applicable. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50,00 Due by May 1, 2005 MANAGING MÉMBÉRS/MANAGERS 3. MGRM TITLE SABIN, CHARLES H NAME STREET ADDRESS 3500 SW CORPORATE PKWY CITY -ST-ZIP PALM CITY, FL 34990 MGRM TITLE U000000300465 NAME EJUPS, ALDIS 04/12/05-80021-013 55.00 3500 SW CORPORATE PKWY STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINT NG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE