

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022037

FILED
Apr 29, 2005
Secretary of State

Entity Name: CRAVEN-PELICAN BAY / DEL PRADO, L.L.C.

Current Principal Place of Business:

26811 SOUTH BAY DRIVE
SUITE 350
BONITA SPRINGS, FL 34134 US

Current Mailing Address:

26811 SOUTH BAY DRIVE
SUITE 350
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

26381 SOUTH TAMIAMI TRAIL
SUITE 300
BONITA SPRINGS, FL 34134 US

New Mailing Address:

26381 SOUTH TAMIAMI TRAIL
SUITE 300
BONITA SPRINGS, FL 34134 US

FEI Number: 01-0639719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONROY, J. THOMAS III
CONROY, COLEMAN & HAZZARD, P.A.
2640 GOLDEN GATE PKWY, STE 115
NAPLES, FL 34105 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: CRAVEN, RICHARD
Address: 5200 WILLSON ROAD, #201
City-St-Zip: EDINA, MN 55424

Title: MGR () Delete
Name: LAUER, RICHARD A
Address: 26811 SOUTH BAY DRIVE, SUITE 350
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: NASHMAN, JAMES A
Address: 26811 SOUTH BAY DR., STE. 350
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES:

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

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: JAMES A. NASHMAN

PRES

04/29/2005

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