2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000966

Entity Name: LOCKS ROAD DEVELOPERS, L.L.C.

FILED Apr 27, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

729 S. FEDERAL HWY STE 200 STUART, FL 34994

Current Mailing Address: New Mailing Address:

729 S. FEDERAL HWY STE 200 STUART, FL 34994

FEI Number: 02-0567350 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SCHAFFER, MARTIN 729 S. FEDERAL HWY STUART, FL 34994 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:

Title: P () Delete Title: MGRM (X) Change () Addition Name: SCHAFFER, MARTIN Name: SCHAFFER, MARTIN

Address: 1597 S. PORT ST. LUCIE BLVD Address: 1597 S. PORT ST. LUCIE BLVD City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: () Delete Title: MGR (X) Change () Addition Name: BERTHAUMR, ROBERT JR Name: BERTHAUMR, ROBERT JR Address: 729 S. ST LUCIE BLVD Address: 729 S. ST LUCIE BLVD City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: T () Delete Title: MGR (X) Change () Addition Name: ZARRO, PASQUAL Name: ZARRO, PASQUAL

Address: 729 S. FEDRAL HWY STE 200 Address: 729 S. FEDRAL HWY STE 200

City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994

Title: S () Delete Title: MGR (X) Change () Addition

Name:MORQUINSTIN, ELIName:MORQUINSTIN, ELIAddress:1597 S. PORT LUCIE BLVDAddress:1597 S. PORT LUCIE BLVDCity-St-Zip:PORT SAINT LUCIE, FL 34952City-St-Zip:PORT SAINT LUCIE, FL 34952

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: MARTIN SCHAFFER MGRM 04/27/2004