

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001695

FILED
Jan 06, 2004
Secretary of State

Entity Name: GREEN DESERT PROPERTIES, LLC

Current Principal Place of Business:

2315 53RD. ST.
SARASOTA, FL 342343107

New Principal Place of Business:

2315 53RD. ST.
SARASOTA, FL 342343107 US

Current Mailing Address:

2315 53RD. ST.
SARASOTA, FL 342343107

New Mailing Address:

2315 53RD. ST.
SARASOTA, FL 342343107 US

FEI Number: 01-0593131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAQUETTE, DENNIS
2315 53RD. ST.
SARASOTA, FL 34234

Name and Address of New Registered Agent:

PAQUETTE, DENNIS
2315 53RD. ST.
SARASOTA, FL 34234 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:

01/06/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: PD () Delete
Name: PAGUETTE, DENNIS
Address: 2315 53RD. ST.
City-St-Zip: SARASOTA, FL 342343107

Title: VD () Delete
Name: PHILLIPS, PHILIP
Address: 2315 53RD ST.
City-St-Zip: SARASOTA, FL 342343107

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PAGUETTE, DENNIS
Address: 2315 53RD. ST.
City-St-Zip: SARASOTA, FL 342343107 US

Title: MGR (X) Change () Addition
Name: PHILLIPS, PHILIP
Address: 2315 53RD ST.
City-St-Zip: SARASOTA, FL 342343107 US

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: DENNIS PAQUETTE

MGR

01/06/2004

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