



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2005 8:00 am
Secretary of State

01-14-2005 90036 008 ****50.00

DOCUMENT # L02000001869 1. Entity Name THE BACK FORTY PROPERTIES GROUP, LLC					
Principal Place of Business 2144 POTPOURRI POINT ROCK HILL, SC 29732			Mailing Address 2144 POTPOURRI POINT ROCK HILL, SC 29732		
2. Principal Place of Business		3. Mailing Address 1905 EBENEZER RD.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State ROCK HILL		4. FEI Number 02-0548578	
Zip 29732		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent SUTTON, KEVIN H 101 EAST KENNEDY BLVD. SUITE 3700 TAMPA, FL 33602				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2005				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOLMES, ROBERT J JR. 2144 POTPOURRI POINT ROCK HILL, SC 29732			<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAGGART, JOSEPH W 16401 AVILA BLVD. TAMPA, FL 33613			<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TAGGART, JOSEPH W 16401 AVILA BLVD. TAMPA, FL 33613			<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <u>Robert J. Holmes Jr.</u> 1/4/05 803-324-3500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					