2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000002397 DENVER PROPERTIES, LLC

_Mailing Address

17417 MAGNOLIA ISLAND BLVD. CLERMONT, FL 34711 US

Principal Place of Business

17417 MAGNOLIA ISLAND BLVD. CLERMONT, FL 34711 US

FILED Jan 07, 2005 08:00 AM Secretary of State

Daytime Phone #



DO NOT WRITE IN THIS SPACE

01042005 No Chg-LLC CR2E083 (10/03)

4. FEI Number	Applied For	_
75-2988667	Not Applicable	le
5. Certificate of Status Desired	\$5.00 Additional	_

6. Name and Address of Current Registered Agent

SALERNO, RUSSELL 17417 MAGNOLIA ISLAND BLVD. CLERMONT, FL 34711

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the obligations of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and fille if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE	
Fi D	iling Fee is \$50.00 ue by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SALERNO, RUSSELL 17417 MAGNOLIA ISLAND BLVD. CLERMONT, FL 34711			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000174535 01/10/05-80014-013 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with the tiling 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 certifiancy or the veceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.				

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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