2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 04, 2005 08:00 AM Secretary of State DOCUMENT # L02000003162 1. Entity Name O.P. BUNDY LAND, LLC Principal Place of Business Mailing Address 4218 18TH AVE. W. 4218 18TH AVE. W. BRADENTON, FL 34205 BRADENTON, FL 34205 01172005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 01-0615801 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLALOCK, LANDERS, WALTERS & VOGLER, P.A. DO NOT WRITE **802 11TH STREET WEST** BRADENTON, FL 34205 IN THIS SPACE 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. 1 am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE BUNDY, OTTO M NAME U00000362930 4218 18TH AVE. W. STREET ADDRESS 05/05/05-80138-009 50.00 BRADENTON, FL 34205 CITY-ST-ZIP TITLE NAME BUNDY, PATRICIA A 4218 18TH AVE. W. STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

11. I hereby certify that the information supplied with this filling 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.