2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT FILED Jan 14, 2005 08:00 AM DOCUMENT # L02000004696 **Secretary of State** SOUTH PONTE VEDRA INVESTMENTS, L.L.C. Principal Place of Business __ Mailing Address 5 SOUTH ROSCOE BLVD. 5 SOUTH ROSCOE BLVD. PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 01112005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1421999 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WASHINGTON, MALIVAI O DO NOT WRITE 5 S. ROSCOE BLVD PONTE VEDRA BEACH, FL 32082 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 UNUNO0180504 Due by May 1, 2005 01/14/05-80008-011 50.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE WASHINGTON, MALIVAL NAME STREET ADDRESS 5 S. ROSCOE BLVD CITY-ST-ZIP PONTE VEDRA BEACH, FL 32082 TITLE STREET ADDRESS City-St-Zip TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

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.

SIGNATURE: VIII O.

STREET ADDRESS CITY-ST-ZIP

1-11-05

904-273-6398