2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP

NAME STREET ADDRESS CITY- V-ZIP

ANNUAL REPORT SECRETARY OF STATE VISION OF CORPORATIONS TILLU DOCUMENT # L02000006144 HEATHERWOOD LAKES DEVELOPMENT COMPANY, 05 SEP -7 AM 8: 25 Principal Place of Business Mailing Address 3640 AIRPORT ROAD P.O. BOX 811987 BUILDING 12, UNIT 1 BOCA RATON, FL 33481 BOCA RATON, FL 33431 09062005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 42-1532110 Not Applicable \$5.00 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent KINSEY, JOHN T DO NOT WRITE P.O. BOX 811987 BOCA RATON, FL 33481 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 Due by September 7, 2005 9. MANAGING MEMBERS/MANAGERS **MGRM** TITLE N.B.D. DEVELOPMENT, INC. NAME STREET ADDRESS P.O. BOX 811987 BOCA RATON, FL 33481 CITY-ST-ZIP 100059819141 09/21/05--01026--013 ***50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-\$T-ZIP IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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: JOHN T. KINSTY 9-5-05 5(0/ 389 855)
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING WEMBER, OR AUTHORIZED REPRESENTATIVE Date Daylore Proces