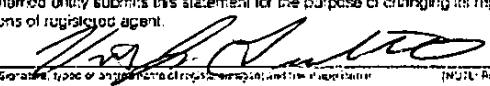
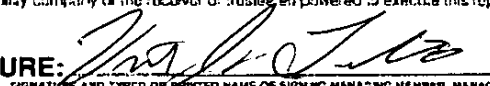


FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90042 020 ****55.00

2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000007994			
1. Entity Name MESSILINO PROPERTIES, LLC			
Principal Place of Business 18840 BIG CYPRESS DRIVE JUPITER, FL 33458		Mailing Address PO BOX 1431 JUPITER, FL 33468	
2. Principal Place of Business 11911 US Highway 7 Suite, Apt. #, etc. 201		3. Mailing Address PO BOX 1431 Suite, Apt. #, etc. Jupiter	
City & State North Palm Beach		City & State Jupiter	
Zip 33408		Zip 33408	
Country USA		Country FL	
4. FEI Number 04-3633434		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required		6. Name and Address of New Registered Agent	
8. Name and Address of Current Registered Agent FIORDILINO, VINCENT 18840 BIG CYPRESS DRIVE JUPITER, FL 33458		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
9. 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 		DATE 6/7/05	
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	
MGR FIORDILINO, VINCENT J 18840 BIG CYPRESS DRIVE JUPITER, FL 33458		☐ Change ☐ Addition	
MGR MESSINA, NEIL 18840 BIG CYPRESS DR JUPITER, FL 33458		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: 		DATE 6/7/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date 6/7/05	