2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: 3 MAN TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED Mar 30, 2005 08:00 AM Secretary of State

561747-1980#22

Daytime Phone #

Date

DOCUMENT # L02000008029 1. Entity Name TONEY PENNA DRIVE PARTNERS, LLC				Secretary of State
Principal Place of Business Mailing Address 150 TONEY PENNA DRIVE JUPITER, FL 33458 JUPITER, FL 33458				
DO NOT WRITE IN THIS SPACE			CE	03282005No Chg-LLC
WHITMIRE, DRENNEN L JR. ESQ 450 ROYAL PALM WAY, SIXTH FLOOR PALM BEACH, FL 33480				DO NOT WRITE 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 Filling Fee is \$50.00 Due by May 1, 2005				
9. MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MILLET, WALTER 8462 WODDCREST PL HOBE SOUND, FL 33455) MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOLTER, BRAD 2825 HANCOCK CREEK WEST PALM BEACH, FL 33411		<u></u>	03/90/05-80019-004 50.00
TITLE NAME STREET ADDRESS CITY+ST-ZIP				DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	-			<u> </u>
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.				