

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008136

FILED
Aug 04, 2004
Secretary of State

Entity Name: ROWE PROPERTIES, LLC

Current Principal Place of Business:

200 SOUTHEAST 13TH STREET
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

PELICAN PLAZA, STE. 228
4731 NORTH HIGHWAY A1A
VERO BEACH, FL 32963

Current Mailing Address:

200 SOUTHEAST 13TH STREET
FORT LAUDERDALE, FL 33316

New Mailing Address:

PELICAN PLAZA, STE. 228
4731 NORTH HIGHWAY A1A
VERO BEACH, FL 32963

FEI Number: 26-0067973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAMLING, FRANK R
200 SOUTHEAST 13TH STREET
FORT LAUDERDALE, FL 33316

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: JOHNSON, PAULINE R
Address: 8820 S SEA OAKS WAY #204
City-St-Zip: VERO BEACH, FL 32963

Title: MGRC () Delete
Name: JOHNSON, WILLIAM P
Address: 8820 S SEA OAKS WAY #204
City-St-Zip: VERO BEACH, FL 32963

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: JOHNSON, WILLIAM P
Address: 8820 S SEA OAKS WAY #204
City-St-Zip: VERO BEACH, FL 32963

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: PAULINE R. JOHNSON

MGRM

08/04/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date