2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008427

Entity Name: EAGLE'S NEST PROPERTIES, LLC

4511 WHITE E GRET LANE

SARASOTA, FL 34238

Address:

City-St-Zip:

FILED Feb 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 609 ISLAND PLACE WAY GENERAL DELIVERY TAMPA, FL 33602 BLOOMINGTON, IL 61701 **Current Mailing Address: New Mailing Address:** 609 ISLAND PLACE WAY GENERAL DELIVERY TAMPA, FL 33602 BLOOMINGTON, IL 61701 FEI Number: 04-3641645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DALRYMPLE, DAVID 609 ISLAND PLACE WAY TAMPA, FL 33602 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete DALRYMPLE, DAVID Name: Name: 609 ISLAND PLACE WAY Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: HEDGE, TOM Name: Address: 101 SUNSET DR., #203, LAWRENCE POINT Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: Title: MGR () Delete Title: () Change () Addition PEMBERTON, LYNN Name: Name: 9712 ROYAL CALCUTTA PLACE Address: Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition Name: DWECK, JOSEPH Name: 6914 WESTCHESTER CIRCLE, LAKEWOOD RANCH Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: Title: MGR () Delete Title: () Change () Addition RIDER, LARRY Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: DAVID DALRYMPLE MGR 02/02/2005