2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
05 MAY -6 AM 10:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000008676

1. Entity Name
MERRICK TRUST, LLC

Principal Place of Business	Mailing Address
3560 MAIN HIGHWAY COCONUT GROVE, FL 33133	3560 MAIN HIGHWAY COCONUT GROVE, FL 33133

05062005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-4498969
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, RANDALL
3560 MAIN HIGHWAY
COCONUT GROVE, FL 33133

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	HILL, RANDALL
STREET ADDRESS	3560 MAIN HIGHWAY
CITY-ST-ZIP	COCONUT GROVE, FL 33133
TITLE	MGR
NAME	LANZAR LUIS
STREET ADDRESS	848 BRICKELL AVE STE 1010
CITY ST ZIP	MIAMI FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

500054306035
05/12/05--01006--014 **55.00

DO NOT WRITE IN THIS SPACE

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: 5/6/05 305 777 8333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #