ANNUAL REPORT

2005 LIMITED LIABILITY COMPANY

CITY-ST-ZIP

TITLE 'V'

CITY-ST-ZIP

STREET ADDRESS

NAME

01-18-2005 90185 022 ****50 00 DOCUMENT # L02000009824 1. Entity Name CHARTER HOMES, LLC 20002573 Principal Place of Business Mailing Address 2901 AVE. OF THE AMERICAS 2901 AVE. OF THE AMERICAS 1 st 11 11 11 11 11 ENGLEWOOD, FL 34224 ENGLEWOOD, FL 34224 2. Principal Place of Business Suite, Apt. #, etc. 01142005 Chg-LLC CR2E083 (10/03) City & State 4. FEI Number Applied For 01-0692721 Not Applicable Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAYLOR, RANDY L Street Address (P.O. Box Number is Not Acceptable) 2901 AVE OF THE AMERICAS ENGLEWOOD, FL 34224 City 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, (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE ☐ Delete TITLE Change ☐ Addition TAYLOR, RANDY L NAME NAME 2901 AVENUE OF THE AMERICAS STREET ADDRESS STREET ADDRESS ENGLEWOOD, FL 34224 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition TAYLOR, VICKI R 2901 AVE. OF THE AMERICAS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ENGLEWOOD, FL 34224 CITY-ST-ZIP TITLE - Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Addition ☐ Change NÂME . . NAME STREET ADDRESS STREET ADDRESS

FILED

Jan 18, 2005 8:00 am Secretary of State

☐ Change ☐ Addition

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CITY-ST-ZIP 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.

CITY - ST-ZIP

STREET ADDRESS

TITLE

NAME

Delete

JRE: ULLL JOHN - VICK, JAYIO F SIGNAND MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE