

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010220

Entity Name: SOUTHFIELDS PLAZA, L.L.C.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

1779 S. CLUB DRIVE
WELLINGTON, FL 33414

New Principal Place of Business:

3975 ISLES VIEW DRIVE
WELLINGTON, FL 33414

Current Mailing Address:

1779 S. CLUB DRIVE
WELLINGTON, FL 33414

New Mailing Address:

3975 ISLES VIEW DRIVE
WELLINGTON, FL 33414

FEI Number: 30-0075462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOFASO, PETER F
1779 S. CLUB DR
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

LOFASO, PETER F
3975 ISLES VIEW DRIVE
WELLINGTON, FL 33414 US

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:

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LOFASO, PETER F
Address: 1779 S. CLUB DR.
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: LOFASO, JOAN W
Address: 1779 S. CLUB DR.
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LOFASO, PETER F
Address: 3975 ISLES VIEW DRIVE
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM (X) Change () Addition
Name: LOFASO, JOAN W
Address: 10674 GREENBRIER VILLA DR.
City-St-Zip: LAKE WORTH, FL 33467

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: PETER F. LOFASO

MGRM

04/26/2005

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