2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010818

Entity Name: MICCO PARK, LLC

FILED Jul 29, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8600 US HIGHWAY 1 MICCO, FL 32976 **Current Mailing Address: New Mailing Address:** 8600 US HIGHWAY 1 MICCO, FL 32976 FEI Number: 81-0556415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BAKER, ANDY 8600 US HWY, 1 US MICCO, FL 32976 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/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete GREENE, JACK Name: Name: Address: 145 BELMONT TRACE Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GREENE, DAVID Name: Address: 1147 BILTMORE DR Address: City-St-Zip: ATLANTA, GA 30329 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GREENE, LALA Name: Name: Address: 145 BELMONT TRACE Address: City-St-Zip: ATLANTA, GA 30329 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GREENE, KERRY Name: Address: 1147 BILTMORE DR Address: City-St-Zip: ATLANTA, GA 30329 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KARLIN, ANN GREENE Name: Name: 300 NORTHLAND RIDGE CT Address: Address: City-St-Zip: ATLANTA, GA 30342 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KARLIN, MICHAEL Name: Name: Address: 300 NORTHLAND RIDGE CT Address: ATLANTA, GA 30342 City-St-Zip: City-St-Zip:

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: DAVID GREENE S 07/29/2005