2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 25, 2005 08:00 AM **DOCUMENT # L02000017576 Secretary of State** 205 N. PARROT AVE. HOLDINGS, LLC Principal Place of Business Mailing Address 6601 PAMELA LANE P.O. BOX 2550 WEST PALM BEACH, FL 33402 WEST PALM BEACH, FL 33405 02232005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-0934890 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CLARK, HARPER A JR DO NOT WRITE 6601 PAMELA AVE WEST PALM BEACH, FL 33403 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 Signature, typed or printer 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 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE CLARK HOLDING COMPANY NAME 6601 PAMELA LANE STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33405 11000000243031 TITLE 12/25/05-AM024-001 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

Daytime Phone #

11. I hereby certify that the information supplied with this filling 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 of the vecevier or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP