

2004 LIMITED LIABILITY COMPANY REINSTATEMENT

**FILED
Nov 22, 2004
Secretary of State**

DOCUMENT# L02000018360

Entity Name: THE ORMOND PAVILIONS LLC

Current Principal Place of Business:

U.S. HIGHWAY 1 NORTH
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

5 JUNIPER DR.
ORMOND BEACH, FL 32176 US

New Mailing Address:

FEI Number: 55-0794695 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROCKENBERG, JOHN S
58 NEPTUNE AVE
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

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/MEMBERS:

Title: MGR () Delete
Name: BUTLER, KEVIN J SR.
Address: 5 JUNIPER DR.
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGR () Delete
Name: CROCKENBERG, JOHN S
Address: 58 NEPTUNE AVE.
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOHN S. CROCKENBERG

MGR

11/22/2004

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