

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Apr 29, 2005
Secretary of State**

DOCUMENT# L02000018360

Entity Name: THE ORMOND PAVILIONS LLC

Current Principal Place of Business:

New Principal Place of Business:

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

Current Mailing Address:

New Mailing Address:

5 JUNIPER DR.
ORMOND BEACH, FL 32176 US

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

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

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

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

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

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

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

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

MGRM

04/29/2005

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