2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021453

City-St-Zip:

Entity Name: FLORIDA TROPICAL INVESTMENTS, LLC

FILED Jun 25, 2005 Secretary of State

Littly Nai	HE. FEORIDA TROFICAL INVESTIMENTS	S, LLC		
Current Principal Place of Business:		New Princ	New Principal Place of Business:	
504 VERAI NAPLES, F	NDA WAY BLVD., B104 FL 34104			
Current Mailing Address:		New Maili	New Mailing Address:	
504 VERAI NAPLES, F	NDA WAY BLVD., B104 FL 34104			
In accordan	81-0592621 FEI Number Applied For() ce with s. 607.193(2)(b), F.S., the limited liability of Address of Current Registered Agent:	• •		
GIRESI, JO 504 VERAI NAPLES, F	NDA WAY BLVD., B104			
	named entity submits this statement for the of Florida.	e purpose of changing i	ts registered office or registered agent, or both	
SIGNATUF				
	Electronic Signature of Registered A	Agent -	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/0	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete GIRESI, JOHN 504 VERANDA WAY BLVD., B104 NAPLES, FL 34104	Title: Name: Address: City-St-Zip:	MGRM (X) Change () Addition GIRESI, JOHN 504 VERANDA WAY BLVD., B104 NAPLES, FL 34104	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	MGRM () Change (X) Addition CARAPAZZA, SHARON 310 MCCLURE MILL ROAD OTTO, NC 28763 US	
Title: Name: Address:	() Delete	Title: Name: Address:	MGRM () Change (X) Addition CARAPAZZA, WAYNE 310 MCCLURE MILL ROAD	

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.

City-St-Zip: OTTO, NC 28763 US

SIGNATURE: JOHN P GIRESI MGRM 06/25/2005