

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021826

FILED
Apr 19, 2004
Secretary of State

Entity Name: RCN PROPERTY INVESTMENTS, LLC

Current Principal Place of Business:

4812 NW 124TH WAY
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

4812 NW 124TH WAY
CORAL SPRINGS, FL 33076

New Mailing Address:

FEI Number: 55-0805138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUTAN, CLIFFORD
4812 N.W. 124TH WAY
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

LOUTAN, CLIFFORD R
4812 N.W. 124TH WAY
CORAL SPRINGS, FL 33076 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: CLIFFORD R. LOUTAN

04/19/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: LOUTAN, RAWLINS
Address: 4812 NW 124TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM () Delete
Name: LOUTAN, CLIFFORD
Address: 4812 NW 124TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM () Delete
Name: LOUTAN, NEIL
Address: 4812 NW 124TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES:

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

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: CLIFFORD R. LOUTAN

MGRM

04/19/2004

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