2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 02, 2005 08:00 AM **DOCUMENT # L02000024388** Secretary of State RAINWATER, LLC Mailing Address Principal Place of Business 276 CLYDESDALE CIRCLE 276 CLYDESDALE CIRCLE SANFORD, FL 32773 SANFORD, FL 32773 CR2E083 (10/03) 01042005No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1650223 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAINWATER, GEORGE DONALD DO NOT WRITE 276 CLYDESDALE CIR. SANFORD, FL 32773 IN THIS SPACE 3. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 .01711500000 Due by May 1, 2005 02/02/05-80129-015 55.00 MANAGING MEMBERS/MANAGERS 9. nneRAINWATER, GEORGE DONALD NAME STREET ADDRESS 276 CLYDES DALE CIR. SANFORD, FL 32773 CITY-ST-ZIP MGRM TITLE RAINWATER, LOIS E NAME 276 CLYDESDALE CIRCLE STREET ADDRESS SANFORD, FL 32773 CITY-SY-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS City-SY-ZIP TITLE NAME STREET ADDRESS

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

TH3012399

SIGNATURE: Diong Donald Pointing GRORGE DODALD RAIN MORATURE AND TYPED OF PRINTED NAME OF STORING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP

GEORGE DODALD RAINWATER

407-330-3877

Deytime Phone #