## 2004 LIMITED LIABILITY COMPANY

SIGNATURE:

## FILED ANNUAL REPORT Jul 07, 2004 08:00 AM DOCUMENT # L02000026180 **Secretary of State** 1. Entity Name VILLAGE SQUARE LLC Principal Place of Business Mailing Address 11 RIVERSIDE DRIVE Suite 200 11 RIVERSIDE DRIVE Suite 200 COCOA, FL 32922 COCOA, FL 32922 07012004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-3657179 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARKEY & FOWLER, PA DO NOT WRITE 25 MCLEOD STREET MERRITT ISLAND, FL 32953 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Rogistered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE Filing Fee is \$50.00 Due by September 8, 2004 U00000163878 07/07/04-80022-004 55.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE PARK, RANDAL G NAME STREET ADDRESS 11 RIVERSIDE DRIVE CITY-ST-ZIP COCOA, FL 32922 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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.

21-863-0318