2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000027635

1. Entity Name SUNBELT - IPF, L.L.C.



Principal Place of Business

2733 ROSS CLARK CIRCLE DOTHAN, AL 36301

Mailing Address

P.O. BOX 5566 DOTHAN, AL 36302

FILED Apr 12, 2005 8:00 am Secretary of State

04-12-2005 90014 040 ****50.00



03282005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 43-2056754

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

| C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 8. The above named entity submits this statement for the purpose of changing its re | | in The second se | O NOT WRITE THIS SPACE r both, in the State of Florida. I am familiar with, and accept |
|---|--|---|---|
| the obligations of registered agent, SIGNATURE | | | g) DATE |
| Filing Fee is \$50.00 Due by May 1, 2005 | | | |
| 9. TITLE NAME STREET ADDRESS CITY-SI-ZIP | MANAGING MEMBERS/MANAGERS MGR BLUMBERG, LARRY P.O. BOX 5566 DOTHAN, AL 36302 | | |
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| 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 | | | |

11. Thereby certify that the information supplied with this filling coes not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther 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 cath; 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: Lul

NATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ichard Blumberg 4050

(334) 193-6855 Daving Phone