2005 LIMITED LIABILITY COMPANY

11. I hereby certify that the information supplied indicated on this report is true and limited liability company or the rec

SIGNATURE AND TYPED O

SIGNATURE:

Apr 11, 2005 8:00 am Secretary of State ANNUAL REPORT 04-11-2005 90049 022 ****50.00 **DOCUMENT # L02000029050** 1. Entity Name PARKER MANAGEMENT FLORIDA, LLC 20028679 Mailing Address Principal Place of Business 9001 DANIELS PKWY STE 200 9001 DANIELS PKWY STE 200 FORT MYERS, FL 33912 FORT MYERS, FL 33912 04052005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 03-0492783 Not Applicable \$5.00 Additional \Box 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANDREW SERVICES CORPORATION OF FLORIDA DO NOT WRITE 201 N. FRANKLIN STREET, SUITE 2100 TAMPA, FL 33602 IN THIS SPACE 8. 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Apent signature required when reinstating) DATE Filing Fee Is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE REISMAN, JOHN MAME STREET ADDRESS 9001 DANIELS PKWY STE 200 FORT MYERS, FL 33912 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the empowered to execute this report as required by Chapter 608, Florida Statutes.

DAVID KNIZNER

IND NAME OF BIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED