2005 LIMITED LIABILITY COMPANY

FILED

	ANNUAL REPORT	<u> </u>	Feb 14, 2005 08:00 A
1. Entity Nan	MENT # L02000031102		Secretary of State
Principal Place of Business Mailing Address 133 SEASPRAY AVENUE 133 SEASPRAY AVENUE PALM BEACH, FL 33480 PALM BEACH, FL 33480			T.
C	DO NOT WRITE IN THIS SPA	ACE	02032005 No Chg-LLC
6. Name and Address of Current Registered Agent PRESSLY, KATHRYN S 133 SEASPRAY AVENUE PALM BEACH, FL 33480			DO NOT WRITE 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 Agent signature required when reinstating) DATE			
Filing Fee is \$50.00 Due by May 1, 2005			
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM PRESSLY, KATHERINE S 133 SEASPRAY AVENUE PALM BEACH, FL 33480		U00000229239 02/14/05-80072-001 50.00
NAME STREET ADDRESS CITY-ST-ZIP TIYLE NAME STREET ADDRESS CITY-ST-ZIP		-	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			IN THIS SPACE
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			
STREET ADDRESS CITY-ST-ZIP 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.			