2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 22, 2005 08:00 AM Secretary of State DOCUMENT # L02000031832 1. Entity Name CYPRESS CREEK GROUP, LLC Mailing Address Principal Place of Business __ 200 WEST FORSYTH STREET, SUITE 1600 200 WEST FORSYTH STREET, SUITE 1600 JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 CR2E083 (10/03) 01272005 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 61-1431865 Not Applicable \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE NEWTON, RUSSELL B III 200 WEST FORSYTH STREET, SUITE 1600 JACKSONVILLE, FL 32202 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. Signature, typed or printed name of registered agent and Itle if applicable (NOTE Registered Agent signature required when reinstating) DATE U00000324701 Filing Fee is \$50.00 Due by May 1, 2005 ′22/05-80107-001 50.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE SKINNER BROS. REALTY CORP. NAME STREET ADDRESS 2963 DUPONT AVE., STE 2 CITY-ST-ZIP JACKSONVILLE, FL 32217 MGR TITLE NEWTON, RUSSELL B III NAME 200 W. FORSYTH ST., STE 1600 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 322024358 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 eath, 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

FILED