2005 Limited Liability Company Annual Report

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FUED		
DOCUMENT # L 0300002517			2005 APR -7 P 4: 16		
1. Limited Liability Company's Name Bermuda Estates 2 Ormand Beach, L.L.C.			SECRETARY OF STAT TALLAHASSEE, FLORI	ΓΕ 'DA	
2. Principal Office Address					
753 East Glen Hvenue Suite, Apt. #, etc.	3 East Glen Avenue P.O. Box 1088 Apt. #, etc. Suite, Apt. #, etc.		4. State/Country of Formation FL / USA		
			5. Date Organized or Qualified		
City & State	State City & State		To Do Business in Florida 1 22 03 6. FEI Number Applied For		
Huburn HL Zip Country	Huburn AL Zio Country	41-14	1.12.217	ot Applicable	
36830	36831-1088	7. CERTIFICATE	E OF STATUS DESIRED 55.00 Addition for a Certific	al Fee required ate of Status	
8. Name and Address of Current Registered Agent					
J. Lindsan Builder Jr. SO4128912389				<u> </u>	
Street Address (P.O. Box Number is Not Acceptable)			120/20 00000		
Suite Ant # 5to				50.00 20.00	
City			State Zip Code	-	
Winter Park			FL 32789	N N	
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent					
Registered Agent			Date		
10. Names and Street Addresses of Managing Members/Managers					
Titles Name of			City / State / Zip		
Mar CCM Advisors, Inc.	r CCM Advisors Inc. 2412 W Country Clu		Tampa, FL 33611		
Mgr Michael V. Shannon 753 E Gknn Ave			Auburn AL 34830		
		04.	800 05069317 /14/05 01009 025 ** 	'8 *50.80	
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11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608,406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. Signature of					
Managing Member/Manager////////////////////////////////////					
, year or printed managing managing managar					

BERMUDA ESTATES @ ORMOND BEACH, LLC

P.O. Box 1088 Auburn, AL 36831-1088 (334) 821-0928

March 28, 2005

Florida Department of State Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

Dear Sir,

We have come to realize that our 2004 annual report never got filed correctly. It was rejected twice of which the first time we received it back, corrected and returned. It was then rejected again and returned of which I never received. Our attorney used our street address when this entity was formed, but unfortunately we do not have a mail receptacle at our physical address. Sometimes the post office will forward to our P.O. Box and sometimes they simply return our mail. I have used our correct P.O. Box for our mailing address on the 2005 form.

I have enclosed a copy of the 2004 report with section 9 now complete. After speaking with Agnes, of your office, on the telephone today, she let me know that's why it was rejected the second time. I have also enclosed a copy of the 2004 cancelled check showing that the 2004 fee was paid in a timely manner. I'm also enclosing the 2005 completed annual report with a check for \$50.00.

Hopefully this will bring the matter to a close and will reinstate our entity after it was revoked in error.

Sincerely,

Owner Representative

Enclosures