## 2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

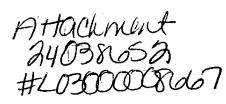
SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

## Apr 09, 2004 8:00 am Secretary of State **DOCUMENT # L03000008667** 04-09-2004 90219 048 \*\*\*\*50.00 ONMI REAL ESTATE, L.C. Mailing Address Principal Place of Business C/O DAVID A. HOLMES, ESQ 21229 OLEAN BOULEVARD, SUITE B 24038652 PORT CHARLOTTE, FL 33952 P.O. DRAWER 511447 PUNTA GORTA, FL 33951-1447 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 02032004 CR2E083 (10/03) Chg-LLC Applied For City & State City & State 4. FÉI Number 05-0561045 Not Applicable \$5.00 Additional Ζįρ Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HOLMES, DAVID A ESQ Street Address (P.O. Box Number is Not Acceptable) FARR FARR EMERICH SIFRIT HACKETT AND CARR 99 NESBIT STREET PUNTA GORDA, FL 33950 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 Make check payable to Filing Fee is \$50.00 Due by May 1, 2004 Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. Manager Change Addition ☐ Delete TITLE TITLE NAME James E. White NAME STREET ADDRESS STREET ADDRESS 21229 Olean Blvd., Suite B CITY-ST-ZIP CITY-ST-ZIP Port Charlotte, FL 33952 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITL F ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 accepted 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 fustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

941-255-8676

4-5-04



## ONMI REAL ESTATE, L.C.

## WRITTEN STATEMENT IN LIEU OF ANNUAL MEETING OF MEMBERS

THE UNDERSIGNED, being the members of ONMI REAL ESTATE, L.C., a Florida limited liability company (the "Company"), hereby consent to and adopt the following resolutions, taking said action in lieu of a meeting:

RESOLVED, that JAMES E. WHITE be and hereby is ratified as the manager of the Company with a term commencing the date hereof and ending at such time his successor is elected.

RESOLVED, that all the lawful actions on behalf of the Company taken by the members and manager of the Company since the date of organization of this Company and prior to the date hereof are hereby ratified, approved and affirmed.

IN WITNESS WHEREOF, the undersigned hereby executes this written consent and adoption effective as of the date hereof.

DATED as of the 4 day of April , 2004.

JAMES E. WHITE, Member