2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2005
Secretary of State

DOCUMENT# L03000012401

Entity Name: BRIDGE PLAZA FORT MYERS LIMITED COMPANY

Current Principal Place of Business:

730 BIRDIE VIEW POINT
SANIBEL ISLAND, FL 33957

New Principal Place of Business:

Current Mailing Address:

730 BIRDIE VIEW POINT
SANIBEL ISLAND, FL 33957

New Mailing Address:

P.O. BOX 566
SANIBEL ISLAND, FL 33957

FEI Number: 65-0795534 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBERT LEE RATLIFF III
730 BIRDIE VIEW POINT
SANIBEL ISLAND, FL 33957 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: BRIDGE PLAZA RATLIFF, , INC.
Address: 730 BIRDIE VIEW POINT
City-St-Zip: SANIBEL ISLAND, FL 33957

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR ( ) Change (X) Addition
Name: RATLIFF, ROBERT L
Address: 730 BIRDIE VIEW POINT
City-St-Zip: SANIBEL, FL 33957

Title: MGR ( ) Change (X) Addition
Name: RATLIFF, RACHEL L
Address: 730 BIRDIE VIEW POINT
City-St-Zip: SANIBEL, FL 33957

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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.

SIGNATURE: RACHEL L. RATLIFF MGR 02/19/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date