## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 20, 2005 8:00 am Secretary of State 04-20-2005 90031 050 \*\*\*\*50.00

DOCUMENT # L03000016806  1. Entity Name DEVELOPERS OF ADMIRAL'S LANDING, LLC  Principal Place of Business 223 TAYLOR STREET PUNTA GORDA, FL 33950  PUNTA GORDA, FL 33951  2. Principal Place of Business 10.9 Taylor Street Suite, Apt. #, etc. Suite,	****50.00	)
223 TAYLOR STREET PUNTA GORDA, FL 33950  P. O. BOX 511448 PUNTA GORDA, FL 33951  2. Principal Place of Business 1.09 Taylor Street Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 112  City & State Punta Gorda, FL Zip 33950  USA  Country Zip Country Zip Country Zip Country S. Certificate of Status Desired  WOTITZKY, EDWARD L 223 TAYLOR STREET PUNTA GORDA, FL 33950  B. 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 the obligations of registered agent.  SIGNATURE  Filling Fee is \$50.00 Due by May 1, 2005		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 112 City & State Punta Gorda FI. Zip 33950 Country USA  6. Name and Address of Current Registered Agent WOTITZKY, EDWARD L 223 TAYLOR 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 the obligations of registered agent.  SIGNATURE Signature, typed or presed name of registered agent and the f approache.  Signature, typed or presed name of registered agent and the f approache.  Make check of Florida Department for the purpose of Changing its registered agent agent when remaining)  Make check of Florida Department for the purpose of Status Desired agent a		
Suite, Apt. #, etc. Suite 112  City & State Punta Gorda, FL Zip 33950  Country USA  Country Tip Country Tip Country Tip Country Tip Country Tip Country Tip		
Suite 112 City & State Punta Gorda FL Zip 33950 USA  6. Name and Address of Current Registered Agent  WOTITZKY, EDWARD L 223 TAYLOR STREET PUNTA GORDA, FL 33950  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am the obligations of registered agent.  SIGNATURE Filling Fee is \$50.00 Due by May 1, 2005  City & State  4. FEI Number 57-1169077  Country 5. Certificate of Status Desired  57-1169077  Founts  Name Edward L, Wotitzky Street Address (P.O. Box Number is Not Acceptable) 109 Taylor Street—Suite 112  City Punta Gorda  FL SIGNATURE  Signature, typed or preside name of registered agent and the flapphcable.  (NOTE: Registered Agent agenture required when remaining)  Make check of Florida Department of the purpose of the	01062005 Chq-LLC CR2E083 (10/03)	
Punta Gorda FI.  Zip Country JSA  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered  WOTITZKY, EDWARD L 223 TAYLOR 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 the obligations of registered agent.  SIGNATURE  Filling Fee is \$50.00 Due by May 1, 2005  Country 5. Certificate of Status Desired  Signature, Special Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  109 Taylor Street—Suite 112  City Punta Gorda  FL  Make check of Florida Department of the purpose of Changing its registered Agent agreet when remaining)  Make check of Florida Department of the purpose of Changing its registered Agent agreet when remaining)  Make check of Florida Department of the purpose of Changing its registered Agent agreet when remaining)  Make check of Florida Department of the purpose of Changing its registered Agent agreet when remaining)		
Zip 33950  Country USA  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered  WOTITZKY, EDWARD L 223 TAYLOR STREET PUNTA GORDA, FL 33950  City Punta Gorda  FL  City Punta Gorda  FL  Signature, typed or presend name of registered agent and title if applicable.  Filling Fee is \$50.00 Due by May 1, 2005  Due by May 1, 2005  Country  5. Certificate of Status Desired  F. Name and Address of New Registered  F. Name and Address of New Registered  F. Name and Address of New Registered  Famous and Address of New Registered  Famous and Address of New Registered  Fedward L. Wotitzky  Street Address (P.O. Box Number is Not Acceptable)  109 Taylor Street—Suite 112  City Punta Gorda  FL  Make check (Fiorida Department for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am  the obligations of registered agent.  Make check (Fiorida Department for the purpose of changing its registered Agent agentury required when remaining)  Make check (Fiorida Department for the purpose of changing its registered Agent agentury required when remaining)  Make check (Fiorida Department for the purpose of changing its registered Agent agentury required when remaining)	<del></del>	ot Applicable
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WOTITZKY, EDWARD L 223 TAYLOR STREET PUNTA GORDA, FL 33950  Street Address (P.O. Box Number is Not Acceptable) 109 Taylor Street — Suite 112  City Punta Gorda  FL  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 the obligations of registered agent.  SIGNATURE Signature, typed or presed name of registered agent and life if applicable. (NOTE: Registered Agent applicable required when remaining)  DATE  Make check if Florida Department in the purpose of the purpose of Changing its registered Agent applicable required when remaining)  Make check if Florida Department in the purpose of the purpose of Changing its registered Agent applicable required when remaining)	Fee Require	5
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Signature, typed or presed name of regulatered agent and the f applicable. (NOTE: Regulatered Agent argesture required when remaining)  DATE  Filling Fee is \$50.00  Due by May 1, 2005  Make check of Florida Departm		
Due by May 1, 2005 Florida Departm		
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9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES	S	
TITLE MGRM Delete TITLE  NAME CRIST, DOUGLAS E  STREET ADDRESS CITY-ST-ZP PUNTA GORDA, FL 339511448  Delete TITLE  NAME STREET ADDRESS CITY-ST-ZP CITY-ST-ZP	☐ Change	☐ Addition
TITLE         Delete         TITLE           NAME         NAME           STREET ADDRESS         STREET ADDRESS           CITY-ST-ZIP         CITY-ST-ZIP	☐ Change	Addition
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TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change	Addition
TITLE         □ Delete         TITLE           NAME         NAME           STREET ADDRESS         STREET ADDRESS           CITY-ST-ZIP         CITY-ST-ZIP	☐ Change	Addition
11. I hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further ce indicated on this report is true and courage and that my signature shall have the same legal effect as if made under oath; that I am a managing memb limited liability company or the receiver outrustee approved to execute this report as required by Chapter 6/8, Florida Statutes.	rtify that the inter or manage	nformation or of the
SIGNATURE: SIGNATURE AND TYP STOR FRUITED HAME OF SIGNING MANAGER, MANAGER, OR AUTHORIZED REPRESENTATIVE  Date  ON 6495 F. (R)57	4-420	<b>₩</b>