2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

Jul 12, 2005 08:00 AM **DOCUMENT # L03000019578** Secretary of State 1. Entity Name PODSTERSHIRE, L.L.C. Principal Place of Business Mailing Address 370 N. HATHAWAY AVENUE P.O. BOX 1533 BRONSON, FL 32621 BRONSON, FL 32621 07062005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent BEAUCHAMP, GREGORY V DO NOT WRITE 107 E. PARK AVENUE CHIEFLAND, FL 32644 IN THIS SPACE 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 Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS g. MGR API PROPERTIES 603, L.L.C. NAME STREET ADDRESS 4208 DOUGLAS BLVD U00000372337 A7/12/05-80002-015 50.00 CITY-ST-ZIP GRANITE BAY, CA 95746 TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 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 accurate 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Davrime Phone #

FILED