


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000020417 1. Entity Name REGENCY POINTE I PARTNERS, LLC	
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Principal Place of Business 115 INTERNATIONAL PKWY. HEATHROW, FL 32746	Mailing Address 115 INTERNATIONAL PKWY. HEATHROW, FL 32746
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01132005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3695624	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SODERSTROM, ROGER W
 115 INTERNATIONAL PKWY.
 HEATHROW, FL 32746

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2005

U00000299605
 04/11/05-80113-020 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOOD, DELMAS 115 INT'L PKWY HEATHROW, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SODERSTROM, ROGER 115 INT'L PKWY HEATHROW, FL 32746
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

SIGNATURE: *Roger W Soderstrom* 3-8-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #