2005 LIMITED LIABILITY COMPANY. **ANNUAL REPORT**

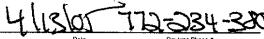
Apr 18, 2005 08:00 AM Secretary of State DOCUMENT # L03000023491 DARROW E. JACKSON, L.L.C. Principal Place of Business Mailing Address 8353 CHINABERRY ROAD 8353 CHINABERRY ROAD VERO BEACH, FL 32963-4224 VERO BEACH, FL 32963-4224 04092005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEi Number Applied For NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WILKINSON, G. BARRY DO NOT WRITE 696 FIRST AVENUE NORTH ST. PETERSBURG, FL 33701 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 May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE JACKSON, DARROW NAME 8353 CHINABERRY RD STREET ADDRESS CITY - ST - ZIP VERO BEACH, FL 32963 TITLE 04/18/05-80139-025 50.00 NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

11. Thereby 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY -ST - ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP

SIGNATURE:



FILED

