

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027854

Entity Name: 1648 OSCEOLA, L.L.C.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

1648 OSCEOLA STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

Current Mailing Address:

1648 OSCEOLA STREET
JACKSONVILLE, FL 32204

New Mailing Address:

FEI Number: 80-0104134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, WILLIAM J III
3713 RICHMOND STREET
JACKSONVILLE, FL 32205 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: MOORE, WILLIAM J III
Address: 3713 RICHMOND STREET
City-St-Zip: JACKSONVILLE, FL 32205

Title: MGR () Delete
Name: SIEGEL, ERIC L
Address: 1850 M STREET NW, SUITE 250
City-St-Zip: WASHINGTON, DC 20036

Title: MGRM () Delete
Name: HENRICHSEN, NEIL L
Address: 2815 GRAND AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: SIEGEL, ERIC L
Address: 5301 WISCONSIN AVENUE NW, SUITE 570
City-St-Zip: WASHINGTON, DC 20015

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

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: NEIL L. HENRICHSEN

MGRM

04/29/2005

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