2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Feb 24, 2005 08:00 AM DOCUMENT # L03000028856 Secretary of State FRINDA GROUP, L.L.C. Principal Place of Business Mailing Address 10148 WINDERMERE CHASE BOULEVARD 10148 WINDERMERE CHASE BOULEVARD **GOTHA, FL 34734** GOTHA, FL 34734 01102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 57-1183514 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent CRAMER, CHARLES W DO NOT WRITE 1411 EDGEWATER DRIVE STE. 100 ORLANDO, FL 32804 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, 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 U00000241789 02/24/05-80058-002 50.00 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE BOHN, ALBERT F NAME STREET ADDRESS 10148 WINDERMERE CHASE BLVD CITY-ST-ZIP GOTHA, FL 34734 MGRM BOHN, LINDA E NAME STREET ADDRESS 10148 WINDERMERE CHASE BLVD **GOTHA, FL 34734** CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE 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)(f), 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.

FILED