


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

**FILED
Jul 11, 2005 08:00 AM
Secretary of State**

DOCUMENT # L03000029318
1. Entity Name
FLORIDA LEISURE INVESTORS, LLC



Principal Place of Business Mailing Address
3250 MARY STREET STE. 501 3250 MARY STREET STE. 501
MIAMI, FL 33133 MIAMI, FL 33133

DO NOT WRITE IN THIS SPACE



07072005No Chg-LLC CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	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

MADRID, SUSAN
3250 MARY STREET STE. 501
MIAMI, FL 33133

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by September 7, 2005**

1100000372015
07/11/05-80012-023 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SIBLEY, PETER L 3250 MARY STREET STE. 501 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR STURGES, ROBERT B 3250 MARY STREET STE. 501 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Peter L Sibley PETER L SIBLEY 305-445-4231
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone if