

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031641

FILED
Apr 26, 2005
Secretary of State

Entity Name: M.O. PROPERTIES, LTD. CO.

Current Principal Place of Business:

2785 SE 45TH STREET
OCALA, FL 34480

New Principal Place of Business:

Current Mailing Address:

2785 SE 45TH STREET
OCALA, FL 34480

New Mailing Address:

FEI Number: 33-1068503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, JULIANN R
2785 SE 45TH STREET
OCALA, FL 34480 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: MILLER, JULIANN R
Address: 2785 SE 45TH STREET
City-St-Zip: Ocala, FL 34480

Title: MGRM () Delete
Name: MILLER, KEITH
Address: 2785 SE 45TH STREET
City-St-Zip: Ocala, FL 34480

Title: MGR () Delete
Name: OWENS, ASHLEY
Address: 4085 NE 17TH AVENUE
City-St-Zip: Ocala, FL 34479

Title: MGRM () Delete
Name: OWENS, RANDY
Address: 4085 NE 17TH AVENUE
City-St-Zip: Ocala, FL 34479

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MILLER, JULIANN R
Address: 2785 SE 45TH STREET
City-St-Zip: Ocala, FL 34480

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

Title: MGRM (X) Change () Addition
Name: OWENS, ASHLEY
Address: 4085 NE 17TH AVENUE
City-St-Zip: Ocala, FL 34479

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: JULIANN MILLER

MGRM

04/26/2005

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