2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

May 13, 2004 8:00 am Secretary of State **DOCUMENT # L03000035797** 05-13-2004 90324 006 ****50 00 PURVIS PROPERTIES, LLC Principal Place of Business Mailing Address 3026 BRANDEMERE DRIVE 3026 BRANDEMERE DRIVE 24075145 TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 03052003 CR2E083 (10/03) Chg-LLC 4. FEI Number 80 -0089 2 20 City & State Applied For City & State Not Applicable Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent ----6. Name and Address of Current Registered Agent BREWSTER, PAM Street Address (P.O. Box Number is Not Acceptable) 3026 BRANDEMERE DRIVE TALLAHASSEE, FL 32312 City Zip Code 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. DATE Make check payable to Filing Fee Is \$50.00 Due by September 8, 2004 Florida Department of State ADDITIONS/CHANGES 9. MANAGING MEMBERS/MANAGERS 10, MERM TITLE TITLÉ ☐ Addition Delete Change NAME Pam Brewster NAME 3026 Brandemere Drive STREET ADDRESS STREET ADDRESS Tallahassee, Florida 32312 CITY-ST-ZIP CITY-ST-ZIP MERM TITLE TILE ☐ Change Addition ☐ Qelete Jana Walling 2121 Oliva Drive NAME NAME STREET ADORESS STREET ADDRESS Tallahassee FL 32308 CTTY-ST-ZIP CTTY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7P TITLE ☐ Detete ☐ Change TITLE ☐ Addition NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change | Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TTILE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(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.

Jana I. Walling

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