

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036049

FILED
Apr 26, 2005
Secretary of State

Entity Name: MCGREGOR RESERVE VENTURE, L.L.C.

Current Principal Place of Business:

2715 EAST OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306

New Principal Place of Business:

Current Mailing Address:

3706 NORTH OCEAN BLVD., SUITE 460
FT. LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 20-0245818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: LESOUSKY, JOHN
Address: 2715 EAST OAKLAND PARK BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: MGR () Delete
Name: GIBBONEY, STEVE
Address: 2715 EAST OAKLAND PARK BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: ST (X) Delete
Name: LESOUSKY, JOHN
Address: 2715 EAST OAKLAND PARK BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33306

ADDITIONS/CHANGES:

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

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

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: JOHN LESOUSKY

MGR

04/26/2005

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